
California Secretary of State



California Electronic Filing Format Guide

July 26, 1999

Revision 01

**State of California
Secretary of State
1500 11th Street
Sacramento, CA 95814**

California Electronic Filing Format Guide

Approved By:

_____ Date: _____

Bernard Soriano, Chief Information Officer

Record of Revisions

Rev	Pages Affected	Description of Changes	Date	Approval
00	All	Initial Release	05/17/1999	
01	All	Updated to reflect Cal version 6	7/26/1999	

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Introduction

The purpose of this document is to provide additional information describing the California Political Disclosure Electronic Filing format known as “CAL”. This document provides step by step instructions on how to construct a CAL file. The examples and illustrations use the Form 419 (F419.cal). A complete description of all forms is provided in Appendix A. This document assumes that the reader is familiar with the State of California Form 419 layout. A complete description of the filing format for all Fair Political Practices Commission (FPPC) series 400 and 600 forms is provided in Appendix A.

This document is intended for programmers, but should be easily understood by individuals with little or no programming experience. This document provides detailed examples of the record/form types: HDR, CVR, SMRY, and RCPT and amendments.

This document is compatible with “CAL” version 6.

Terms

The following terms are used in the document and have the meaning provided.

String: A continuous line of characters.

Example one:

this is a string of characters....

Example two:

1233455, abcdefg,,,Max Inc., x,1

Field 3

This Field 3 refers to the field number in the record form description.

Carriage return : A special character used to denote the end of one line and thus the beginning of a new line (ASCII 13).

Constructing Records:

The following conventions are used when developing “CAL” files:

When populating name fields the last name always appears first followed by the specified name delimiter. The rest of the name, first, middle, and titles, are delimited by a single space. If there is only a single name present for a filing, that name will be entered without any specified name delimiter. The system will treat it as a last name.

For text or string information, the characters need to be enclosed within double quotes whenever there are imbedded commas – refer to the example below:

“Joe’s Meat, Potatoes, and Pie Place”
Joe’s Potatoes and Pie

Both examples are correct. The first example is enclosed within quotes because it has embedded commas after Meat and after Potatoes. Because the second line has no commas, it does not need to be enclosed within quotes.

Leading spaces are not allowed for any field.

All numbers are represented without commas e.g. 100000 for one hundred thousand dollars or 100000.01 for one hundred thousand dollars and one cent.

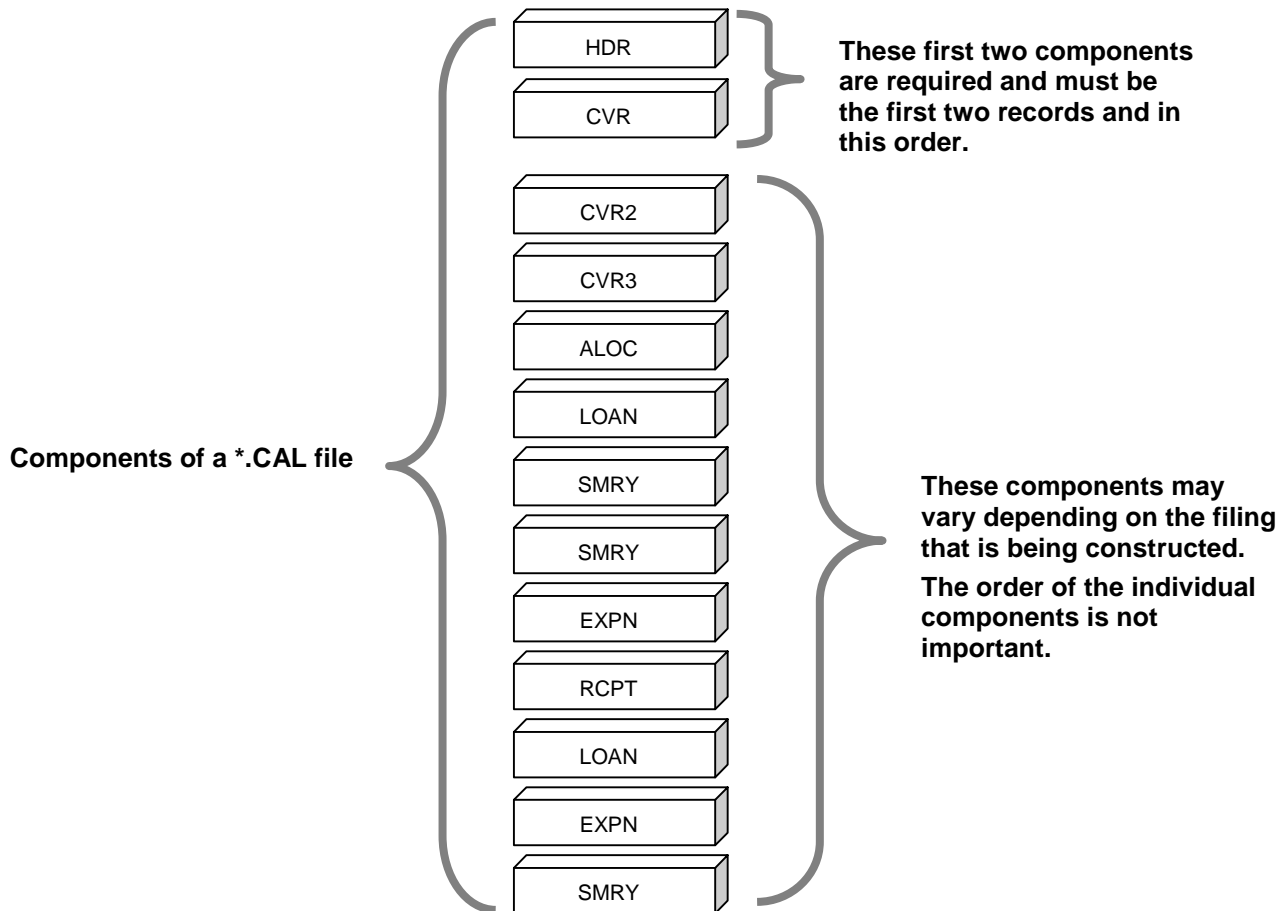
Every record or line of text is completed with a carriage return.

A Word on Examples

The examples to follow use depictions of the current paper filing layouts to illustrate how the CAL format data is mapped. It is not our intention to suggest how the electronic filing interface screens, GUIs, would or should look. Indeed, in some cases the paper filings lack all the fields necessary to capture all the data correctly.

Cal File Overview

A *.cal file is composed of a collection of record types. These record types describe sections within a filing page or form sheet. Record types have been defined to allow for reuse of redundant information within the filing. For example, if the filer's name and address is used in different sections of the form, it is stored once in a record type and is not repeated through out the data file. The illustration below shows an example of how components are used to construct a *.cal file.



Notice that in the previous illustration the *.cal file is composed of record types: HDR, CVR, CVR2, CVR3, and SMRY (a more complete definition of the layout will follow). These record types are **groups of form types**. For example, a Loan **record** type is composed of the following **form** types:

- B1 Loan Received
- B2 Loan - Repayment Made
- B3 Loan - Unpaid Balance
- H1 Loan Made
- H2 Loan - Repayment Received
- H3 Loan - Unpaid Balance

Together these **form** types comprise the **Loan record types group**. For example: the record type of form type B1 is Loan and the record type of B2 is Loan. Both forms belong to the same record type. From a programmer's perspective, this grouping of form types into record types greatly simplifies the programming process. For example, rather than writing a separate module to process each form. The programmer can now write one module that processes a **group of forms that all share the same record type**. The benefits of this approach include shorter development phases, lower development costs, more robust(bug free) code, lower maintenance costs (for the code is now easier to understand), and more normalized data, which increases processing efficiency, provides for better logic processing, and reduces system storage requirements.

Campaign Record and Form Types

The following table identifies all campaign record types and their member form types:

Record Type	Form Type	Description
ALOC	AP	Allocation Page
	AP1	Allocation from Campaign Funds
	AP2	Allocation from Personal Funds
CVR	F401	Slate Mailer Organization
	F419	Ballot Measure Committee
	F420	Recipient Committee
	F425	Semi Annual Statement of No Activity
	F450	Recipient Committee
	F461	Independent Expenditure And Major Donor
	F465	Supplemental Independent Expenditure
	F470	Officeholder/Candidate Short Form & Supplement
	F490	Candidate Committee
	F496	Late Independent Expenditure Report
	F497	Late Contribution Report
CVR2	F420	Part II Additional Committees
	F465	Part II Additional Names and Addresses
	F470	Additional Committee Names and Addresses
	F490	Part II Additional Committees
CVR3	F401	Verification Information
	F419	Verification Information
	F420	Verification Information
	F450	Verification Information
	F461	Verification Information
	F465	Verification Information
	F470	Verification Information
	F490	Verification Information
EXPN	E	Expenditures
	F	Accrued Expenditures
	F450P4	Expenditures and Contributions Made
	F461P5	Expenditures and Contributions Made
	F465P4	Independent Expenditures Made
	G	Expenditures on Behalf of another Committee
F405	F419	Amendment Information Sheet
	F420	Amendment Information Sheet
	F450	Amendment Information Sheet
	F461	Amendment Information Sheet
	F490	Amendment Information Sheet
F495	F419	Supplemental Pre-Election Statement

Record Type	Form Type	Description
F495	F420	Supplemental Pre-Election Statement
	F450	Supplemental Pre-Election Statement
	F490	Supplemental Pre-Election Statement
LOAN	B1	Loan Received
	B2	Loan Repayment Made
	B3	Loan Unpaid Balance
	F461P6	Loan Received (forgiven & Guaranteed) (like a B1)
	F461P7	Loan Repayment Received
	H1	Loan Made
	H2	Loan Repayment Received
	H3	Loan Unpaid Balance
RCPT	A	Schedule A Contributions
	A-1	Schedule A-1 Contributions Transferred to Special Election committees
	C	Schedule C Non-Montary Contributions
	D	Schedule D Promised Moneys
	F401A	Payments Received
	I	Schedule I Miscellaneous
S401	F401B	Payments Made
	F401B-1	Payments Made by Agent/Contractor on Behalf of SMO
	F401C	F400 Persons in SMO Receiving \$1000 or more
	F401D	Candidates/Measures not on Sched F401A
S496	F496	Independent Expenditures Made
S497	F497P1	Late Contributions Received
	F497P2	Late Contributions Made
SMRY	F401	Summary Page and Miscellaneous Line Item Totals
	F419	Summary Page and Miscellaneous Line Item Totals
	F420	Summary Page and Miscellaneous Line Item Totals
	F450	Summary Page and Miscellaneous Line Item Totals
	F461	Summary Page and Miscellaneous Line Item Totals
	F465	Summary Page and Miscellaneous Line Item Totals
	F490	Summary Page and Miscellaneous Line Item Totals

Lobbyist Record and Form Types

The following table identifies all lobbyist record types and their member form types:

Record Type	Form Type	Description
CVR	F615	Cover Page; Lobbyist Report
	F625	Cover Page; Recipient Committee
	F635	Cover Page; Candidate Committee
	F645	Cover Page; Recipient Committee
CVR2	F625	Cover Page; Part II; Partners
	F635	Cover Page; Part II; Partners
F690	F615	Amendment Information sheet (aka Form 690)
	F625	Amendment Information sheet (aka Form 690)
	F635	Amendment Information sheet (aka Form 690)
	F645	Amendment Information sheet (aka Form 690)
HDR	CAL	Header record
LATT	S630	Attach Form 630 - Payments Made to Lobbying Coalitions
	S630	Attachment Form 630 - Payments Made to Lobbying Coalitions
	S635-C	Attach Form 635-C - Payments Rcvd by Lobbying Coalitions
	S640	Attach Form 640 - Other Payments to Influence ...
	S640	Attach Form 640 - Other Payments to Influence ...
LCCM	F615P2	Part II - Campaign Contributions Made [or Delivered]
	F625P4B	Part IV/Sec B - Campaign Contributions Made
	F635P4B	Part IV/SecB - Campaign Contributions Made
	F645P3B	Part III/SecB - Campaign Contributions Made
LEXP	F615P1	Part I - Activity Expenses
	F625P3A	Part III/Sec A - Activity Expenses
	F635P3C	Part III/Sec C - Activity Expenses
	F645P2A	Part II/Sec A - Activity Expenses
LOTH	F625P3B	Part III/Sec B - Payments to OTHER Lobbying Firms
LPAY	F625P2	Payments Received in Connection with Lobbying Activity
	F635P3B	Part III/Sec B - Payments to Lobbying Firms
SMRY	F615...	Summary Page & Misc Schedule Line-item [sub]totals
	F625...	Summary Page & Misc Schedule Line-item [sub]totals
	F635...	Summary Page & Misc Schedule Line-item [sub]totals
	F645...	Summary Page & Misc Schedule Line-item [sub]totals

Components of the Form 419

The Form 419 is comprised of the following record and form types:

<u>Record Type</u>	<u>Form Type</u>	<u>Description</u>
HDR	CAL	CAL Header record
CVR	F419	Cover Page; Ballot Measure Committee
CVR3	F419	Cover Page; Part III; Verification info
F405	F419	Amendment Information sheet (aka Form 405)
F495	F419	Supplemental Pre-Election Statement (aka Form 495)
SMRY	F419...	Summary Page & Misc Schedule Line-item [sub]totals
ALOC	AP	Allocation Page
RCPT	A	Schedule A Contributions
RCPT	C	Schedule C Non-Monetary Contributions
RCPT	D	Schedule D Promised moneys
RCPT	I	Schedule I Miscellaneous
EXPN	E	Expenditures
EXPN	F	Accrued (Unpaid) Expenditures
EXPN	G	Expenditures on behalf of another Committee
LOAN	B1	Loan Received
LOAN	B2	Loan - Repayment Made
LOAN	B3	Loan - Unpaid Balance
LOAN	H1	Loan Made
LOAN	H2	Loan - Repayment Received
LOAN	H3	Loan - Unpaid Balance

Constructing the HDR Record

Header Record

Begin the filing with the following information exactly as shown.

```
[Header]
State_Cd,CA
PDP_Ver,1.00
Soft_Name,VENDOR SOFT
Soft_Ver,1.00
Form_Type,F419
Filer_ID,71609
Entity_Cd,COM
Filer_Name,CITIZENS FOR AN EDUCATED AMERICA
RecTally,CVR3,00001
RecTally,SMRY,419,00001
RecTally,ALOC,AP,00001
RecTally,RCPT,A,00001
RecTally,RCPT,C,00001
RecTally,RCPT,D,00001
RecTally,RCPT,I,00001
RecTally,EXPN,E,00001
RecTally,EXPN,F,00001
RecTally,EXPN,G,00001
RecTally,LOAN,B1,00001
RecTally,LOAN,B2,00001
RecTally,LOAN,B3,00001
RecTally,LOAN,H1,00001
RecTally,LOAN,H2,00001
RecTally,LOAN,H3,00001
[End Header]
HDR,CAL,CA,1.00,VENDOR SOFT,1.00
```

This portion of the file can be created automatically by using HdrGenr.EXE, which is a utility program supplied free of charge by the California Secretary of State.

Note: Items that are highlighted will be replaced with information particular to company, state and filing.

Note: The CVR and HDR record types are not in the above listed.

Lists the total number of records for a particular rec/form

```
[Header]
State_Cd,CA
CAL_Ver,1.00
Soft_Name,VENDOR SOFT
Soft_Ver,1.00
Form_Type,F419
Filer_ID,71609
Entity_Cd,COM
Filer_Name,CITIZENS FOR AN EDUCATED
AMERICA
RecTally,CVR3,00001
RecTally,SMRY,419,00001
RecTally,ALOC,AP,00001
RecTally,RCPT,A,00001
RecTally,RCPT,C,00001
RecTally,RCPT,D,00001
RecTally,RCPT,I,00001
RecTally,EXPN,E,00001
RecTally,EXPN,F,00001
RecTally,EXPN,G,00001
RecTally,LOAN,B1,00001
RecTally,LOAN,B2,00001
RecTally,LOAN,B3,00001
RecTally,LOAN,B4,00001
RecTally,LOAN,B5,00001
RecTally,LOAN,B6,00001
RecTally,LOAN,B7,00001
RecTally,LOAN,B8,00001
RecTally,LOAN,B9,00001
[End Header]

HDR,CAL,CA,1.00,VENDOR SOFT,1.00
```

Form type

Name Of Software Vendor

Indicates this to be a Header Record Filing type state State Version Vendor Vendor Version

HDR.CAL.CA.1.00.VENDOR SOFT.1.00

CVR Definition

Cover Page

The following table lists all the fields that compose a CVR record type for FORM 419.

Field Position in Record	Indicates whether the field is Required (R) Absolutely Required(Rx) ¹ Conditionally Required (C) Absolutely Conditionally Required (Cx) ¹	Field Name	Maximum length in characters	Description/Values
01	Rx	REC_TYPE	3	Record Type Value: CVR
02	Rx	FORM_TYPE	4	Type of Filing or Formset.Values: F419; F420; F490
03	Rx	FILER_ID	7	Committee ID number of Filer
04		ENTITY_CD	3	Values:CAO - Candidate/Office-holder (F490,465,496,
05	Rx	FILER_NAML	200	Filer's Last name
06	C	FILER_NAMF	45	Filer's First name(s) (Required for persons)
07		FILER_NAMT	10	Filer's Prefix or Title
08		FILER_NAMS	10	Filer's Suffix
09	Rx	REPORT_NUM	3	Report Number - Values: 000 - Original Report00
10	Rx	RPT_DATE	8	Date this report is filed
11	Cx	STMT_TYPE	2	Type of Statement - Values:PE = Pre-Election
12	Cx	FROM_DATE	8	Reporting Period From Date (not Req on F496 & F49
13	Cx	THRU_DATE	8	Reporting Period Thru Date (not Req on F496 & F49
14	C	ELECT_DATE	8	Date of the General Election(Req on F419,F420,F450,
15	R	FILER_ADR1	45	Address of Filing Entity
16		FILER_ADR2	45	" " " "
17	R	FILER_CITY	30	" " " "
18	R	FILER_ST	2	" " " "
19	R	FILER_ZIP4	10	" " " "
20		FILER_PHON	20	
21		FILER_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
22		FILE_EMAIL	60	Email Address {not mapped to present FPPC forms}
23	C	TRES_NAML	200	Treasurer or Responsible Officer's Last name(Tres f
24	C	TRES_NAMF	45	Treasurer or Responsible Officer's First name
25		TRES_NAMT	10	Treasurer or Responsible Officer's Prefix or Title
26		TRES_NAMS	10	Treasurer or Responsible Officer's Suffix
27	C	TRES_ADR1	45	Treasurer or Responsible Officer Address
28		TRES_ADR2	45	" " " "
29	C	TRES_CITY	20	" " " "
30	C	TRES_ST	2	" " " "
31	C	TRES_ZIP4	10	" " " "
32		TRES_PHON	20	" " " "
33		TRES_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
34		TRES_EMAIL	60	Email Address {not mapped to present FPPC forms}
35	C	SPONSOR_YN	1	Sponsored Committee? Yes/No (Null on F496)
36	C	SNGL_MSR_YN	1	Single Measure? Yes/No (Null on F496)
37	C	CONTROL_YN	1	Controlled Committee Yes/No (Null on F496)

¹ The system will reject the filing and stop the upload process.

38	C	BAL_NAME	200	Ballot Measure Name
39	C	BAL_NUM	3	Ballot Number or Letter
40	C	BAL_JURIS	30	Jurisdiction of Ballot Measure
41	C	OFFHLDNAML	200	Candidate/Officeholder's Last name
42	C	OFFHLDNAMF	45	Candidate/Officeholder's First name(s)
43		OFFHLDNAMT	10	Candidate/Officeholder's Prefix or Title
44		OFFHLDNAMS	10	Candidate/Officeholder's Suffix
45	C	OFFICE_CD	3	Office Sought (See table of code in Overview)
46	C	OFFIC_DSCR	30	Office Sought Description (Req if Office_Cd=OTH)
47	C	JURIS_CD	3	Office Jurisdiction Code Values: STW=Statewide;
48	C	JURIS_DSCR	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT C
49	C	DIST_NO	3	Office District Number (Req if Juris_Cd=[SEN ASM BO
50		OFF_S_H_CD	1	Office Sought/Held Code: H=Held; S=Sought
51	R	SUP_OPP_CD	1	Support/Oppose? Values: S; 0

Constructing the CVR Record

The following steps are required to construct a cover record:

Field (1) Begin the first record first field with the text CVR

CVR,

Field (2) Place the text F419 into the next field.

CVR,**F419,**

Field (3) GET THE Filer's FILER_ID (filer identification) from the form.

CVR,F419,**71609,**

Field 3

Ballot Measure Committee Campaign Disclosure Statement — Long Form

Type or print in in

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

- ☐ Pre-election Statement ☐ Termination Statement (Attach a completed Form 415 to this statement.)
☐ Quarterly Statement
☒ Semi-annual Statement

Committee Information

NAME OF COMMITTEE

CITIZENS FOR AN EDUCATED AMERICA

ADDRESS OF COMMITTEE (NO. AND STREET)

55 S. Tower Street

CITY
Los Angeles

STATE
CA

I.D. NUMBER
71609

ZIP CODE
90071

AREA CODE/PHONE NUMBER (213)489-4799

Field (4) Set the ENTITY_CD to the text COM (Committee)

CVR,F419,71609,COM,

Fields (5...8) Get FILER_NAML,FILER_NAME,FILER_NAMT,FILER_NAMS,(committee name) from the form. For committee names use the FILER_NAML field 5. Fields 6, 7, and 8 are left blank.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,, , ,

**Ballot Measure Committee
Campaign Disclosure Statement —
Long Form**
(Government Code Sections 84200-84216.5)
SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

☐ Pre-election Statement ☐ Termination Statement (Attach a completed Form 415 to this statement.)
☐ Quarterly Statement
☒ Semi-annual Statement

I Committee Information

NAME OF COMMITTEE

CITIZENS FOR AN EDUCATED AMERICA

ADDRESS OF COMMITTEE (NO. AND STREET)

55 S. Tower Street

CITY Los Angeles STATE CA ZIP CODE 90071

AREA CODE/PHONE NUMBER (213)489-4799

I.D. NUMBER 971609

Type or print in it

Field 5

Fields 6..8

Field (9) Set the REPORT_NUM (amendment indicator). The default is zero for an original filing.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0

Field (10) Set RPT_DATE (report date) to the system date. For example, May 5, 1999 is 19990505.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505

Field (11) Get the STMT_TYPE (statement type) from the form

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA

Ballot Measure Committee Campaign Disclosure Statement — Long Form

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed.

☐ Pre-election Statement

☐ Termination Statement (Attach a
completed Form 415 to this statement.)

☐ Quarterly Statement

☒ Semi-annual Statement

Committee Information

NAME OF COMMITTEE

CITIZENS FOR AN EDUCATED AMERICA

ADDRESS OF COMMITTEE

(NO. AND STREET)

55 S. Tower Street

I.D. NUMBER

971609

CITY

Los Angeles

STATE

CA

ZIP CODE

90071

AREA CODE/PHONE NUMBER

(213)489-4799

Type or print in it

Field 11

Field (12) Get the FROM_DATE off the form

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,

**Ballot Measure Committee
Campaign Disclosure Statement —
Long Form**

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

☐ Pre-election Statement

☐ Quarterly Statement

☐ Semi-annual Statement

☐ Termination Statement (Attach a
completed Form 415 to this statement.)

Type or print in ink.

Statement covers period	
from	07/01/98
through	12/31/98
Date of election if applicable: (Month, Day, Year)	

Field 12

Field 13

Field 14

Field (13) Get the THRU_DATE (Through date) off the form

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,

Field (14) Get the ELECT_DATE (election date) off the form. **If no date then enter an empty field.**

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,,

Field (15) Get FILER_Adr1(committee address one) from the form.
CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,,
55 S. Tower Street

Ballot Measure Committee Campaign Disclosure Statement — Long Form

Type or print in ink

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

- ☐ Pre-election Statement ☐ Termination Statement (Attach a completed Form 415 to this statement.)
☐ Quarterly Statement
☒ Semi-annual Statement

Committee Information

NAME OF COMMITTEE

CITIZENS FOR AN EDUCATED AMERICA

ADDRESS OF COMMITTEE

55 S. Tower Street

(NO. AND STREET)

I.D. NUMBER

971609

CITY

Los Angeles

STATE

CA

ZIP CODE

90071

AREA CODE/PHONE NUMBER

(213)489-4799

Field (16) Get Cmte_Adr2(committee address two) from the form. **If there is no second address then enter a blank field.**

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,,
55 S. Tower Street,

Field 16

Field (17) Get FILER_CITY(committee city) from the form.

Field (18) Get FILER_ST(committee state) from the form.

Field (19) Get FILER_ZIP4 (committee zip code) from the form.

Field (20) Get FILER_PHON(committee phone) from the form.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,,
55 S. Tower Street,,**Los Angeles,CA,90017,2134894799,**

**Ballot Measure Committee
Campaign Disclosure Statement –
Long Form**
(Government Code Sections 84200-84216.5)
SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

☐ Pre-election Statement ☐ Termination Statement (Attach a completed Form 415 to this statement.)
☐ Quarterly Statement
☒ Semi-annual Statement

Committee Information

NAME OF COMMITTEE
CITIZENS FOR AN EDUCATED AMERICA

ADDRESS OF COMMITTEE (NO. AND STREET) I.D. NUMBER
55 S. Tower Street 71609

CITY STATE ZIP CODE
Los Angeles CA 90071

AREA CODE/PHONE NUMBER (213)489-4799

Field (17) points to "Los Angeles".
Field (18) points to "CA".
Field (19) points to "90071".
Field (20) points to "(213)489-4799".

Fields (21,22) FILER_FAX and FILER_EMAIL are not on the form you may set these to blank.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799,,

- Fields (23..26) Get TRES_NAML,TRES_NAMF,TRES_NAMT,TRES_NAMS (Treasurer's name) from form
 20. Get TRES_ADR1 (Treasurer's address one) from form
 21. Get TRES_ADR2 (Treasurer's address two) from form
 22. Get TRES_CITY (Treasurer's city) from form
 23. Get TRES_ST (Treasurer's state) from form
 24. Get TRES_ZIP4 (Treasurer's zip) from form
 25. Get TRES_PHON (Treasurer's phone) from form

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799, , ,

Tould,David L.,,,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799

ik

Statement covers period from through Date Fields 23..26 (Month, Day, Year) Date Fields 23..26

COVER PAGE - BALLOT FORM CIVIL RIGHTS ACT 419

Field 27 Field 28 Field 29 Field 30 Field 31 Field 32

NAME OF TREASURER David L. Tould

PERMANENT ADDRESS OF TREASURER (NO. AND STREET) 55 S. Tower Street

CITY Los Angeles

STATE CA

ZIP CODE 90017

AREA CODE/PHONE (213)489-4799

Attach additional information on appropriately labeled continuation sheets.

be primarily formed to support or oppose a single measure, qualification of a single
 or state election? (If yes, complete the following.) ☐ No

Fields (33,34) TRES_FAX and TRES_EMAIL are not on the form you may set these to blank.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799,, ,Tould,David L., ,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799,, ,

Fields (35) Get SPONSOR_YN (s this a sponsored committee)

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799,, ,Tould,David L., ,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799,, , **N**

Attach additional information on appropriate numbered continuation sheets.

II Committee Type (See definitions and special instructions on reverse.)

• Is this a sponsored committee? ☐ Yes ☒ No — Is this committee primarily formed to support or oppose a single measure, qualification of a single measure, or specific measures being voted upon in a single city, county, or state election? (If yes, complete the following.) ☐ No

NAME OF BALLOT MEASURE	JURISDICTION	BALLOT NUMBER LETTER	SUPPORT	OPPOSE
English For The Children		227		<input checked="" type="checkbox"/>

• Is this committee controlled by an officeholder, candidate, or state measure proponent? (If yes, complete the following.) ☒ No

NAME OF OFFICEHOLDER, CANDIDATE OR PROPONENT	OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

III Verification

I have used all reasonable diligence in preparing this statement. I have prepared the statement and to the best of my knowledge the information contained

Fields (36) Get Sngl_Msr_YN (is this a single measure committee yes/no) from form. **Yes Field currently does not exist on paper form.**

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799,, ,Tould,David L., ,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799,, ,N,**Y**,

Fields (37) Get Control_YN (is this a controlled yes/no) from form. **Yes Field currently does not exist on paper form.**

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799,, ,Tould,David L., ,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799,, ,N,Y,**N**

Fields (38) Get Bal_name (ballot measure name) from form.

Fields (39) Get Bal_Num (ballot measure number) from form.

Fields (40) Get Bal_Juris (ballot measure jurisdiction) from form. If blank enter blank field.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799, , ,Tould,David L., , ,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799, , ,N,Y,N,

English For The Children,227,,

Attach additional information on appropriately labeled continuation sheets.

II Committee Type (Definitions and special instructions on reverse.)			
• Is this a sponsored committee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		• Is this committee primarily formed to support or oppose a single measure, qualification of a single measure, or specific measures being voted upon in a single city, county, or state election? (If yes, complete the following.) <input type="checkbox"/> No	
NAME OF BALLOT MEASURE	JURISDICTION	BALLOT NO. OR LETTER	SUPPORT OPPOSE
English For The Children		227	X
• Is this committee controlled by an officeholder, candidate, or measure proponent? (If yes, complete the following.) <input checked="" type="checkbox"/> No			
NAME OF OFFICEHOLDER, CANDIDATE OR PROPONENT	OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY	

III Verification

I have used all reasonable diligence in preparing this statement. I have confirmed the statement and to the best of my knowledge the information contained

Add a carriage return to the end of the string to complete the record.

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower
Street,,Los Angeles,CA,90017,2134894799, , ,Tould,David L., , ,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799, , ,N,Y,
N,English For The Children , 227,,,,,,,,,,O

CVR3 Definition

The following table identifies all the fields that compose a CVR3 record type for FORM 419.

Field Position in Record	Indicates whether the field is Required (R) Absolutely Required(Rx) Conditional Required (C) Absolutely ² Conditional Required (Cx)	Field Name	Maximum length in characters	Description/Values
01	Rx	REC_TYPE	4	Record Type Value: CVR3
02	Rx	FORM_TYPE	4	Form_Type (must equal Form_Type in CVR record)Values: F4...
03	Rx	ENTITY_CD	3	Values: TRE - TreasurerCAO - Candidate/Office-holderOFF...
04	R	SIG_DATE	8	Date when signed
05	R	SIG_LOC	45	City and State where signed
06	R	SIG_NAML	200	Treasurer "as signed" Last name
07	R	SIG_NAMF	45	Treasurer "as signed" First name
08		SIG_NAMT	10	Treasurer "as signed" Prefix or Title
09		SIG_NAMS	10	Treasurer "as signed" Suffix

² The system will reject the filing and stop the upload process.

Constructing the CVR3 Record

The construction of this record is the same as with the CVR record.

Fields (1,2) Begin the record by identifying its record type and form type with the following:

CVR3,F419,

Fields (3) Next determine the entity type:

CVR,F419,**TRE**

Fields (4...9) Get SIG_DATE,SIG_LOC and SIG_NAME from the form and complete the record with a carriage return.

Diagram illustrating the construction of the CVR3 record from the form fields:

Fields (1,2) are identified as **CVR3,F419,**

Fields (3) are identified as **TRE**

Fields (4...9) are identified as **19991231, "LOS ANGELES, CA", TOULD,DAVID,,**

The form fields are labeled as follows:

- Field 4: 12/31/99
- Field 5: LOS ANGELES, CA
- Fields 6..9: DAVID TOULD

The form includes the following sections:

III Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 12/31/99 At LOS ANGELES, CA By DAVID TOULD

An officeholder, candidate, or state measure proponent who controls a committee must also verify the campaign statement. I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 12/31/99 At LOS ANGELES, CA By PHIL D. IRT

Executed on 12/31/99 At LOS ANGELES, CA By SARA BELLUM

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT.

Proceed as above for each additional record

CVR3,F419,TRE,19991231,LOS ANGELES^CA,DAVID TOULD

CVR3,F419,OFF,19991231, "LOS ANGELES, CA",IRT,PHIL D.,,

CVR3,F419,OFF,19991231, "LOS ANGELES, CA", BELLUM,SARA,,

At this point the filing now has one HDR record,one CVR record,and three CVR3 records.

HDR,CAL,CA,1.00,VENDOR SOFT,100

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799, , ,Tould,David L., , ,55 S. Tower Street ,,Los Angeles,CA,90017,2134894799, , ,N,Y, N,English For The Children , 227,,,,,,,,,O

CVR3,F419,TRE,19991231, "LOS ANGELES, CA", TOULD,DAVID, ,

CVR3,F419,OFF,19991231, "LOS ANGELES, CA",IRT,PHIL D.,,

CVR3,F419,OFF,19991231, "LOS ANGELES, CA", BELLUM,SARA,,

SMRY Definition

The following table lists all the fields that compose a SMRY record type for FORM 419.

Field Position in Record	Indicates whether the field is Required (R) Absolutely Required(Rx) Conditional Required (C) Absolutely ³ Conditional Required (Cx)	Field Name	Maximum length in characters	Description/Values
01	Rx	REC_TYPE	4	Record Type Value: SMRY internal
02	Rx	FORM_TYPE	8	Value: F419 internal
03	Rx	LINE_ITEM	8	Line number
04	Rx	AMOUNT_A	12	Summary Amount Column A
05	Cx	AMOUNT_B	12	Summary Amount Column B
06	Cx	AMOUNT_C	12	Summary Amount Column C

³ The system will reject the filing and stop the upload process.

Constructing the SMRY Record

The construction of this record is the same as with previous record types.

& 2. Begin the record by identifying its record type and form type with the following:

SMRY,F419,

3. Get the LINE_ITEM number that will be represented:

SMRY,F419,1

Ballot Measure Committee Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from _____ through _____	CALIFORNIA 1994 FORM 419 Page _____ of _____ I.D. NUMBER _____
--	--

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
1. Monetary Contributions	Schedule A, Line 3	\$ 12,076.82	\$ 3,502,039.46	\$ 3,514,116.28
2. Loans Received	Schedule B, Line 7	(475.00)	475.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 11,601.82	\$ 3,502,514.46	\$ 3,514,116.28

4 - 7 Get Column values (Amount_A, Amount_B, and Amount_C) :

SMRY,F419,1,12076.82,3502039.46,3514116.28

Complete the record with a carriage return.

For each line item, proceed as above.

Ballot Measure Committee Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from _____ through _____	CALIFORNIA 1994 FORM 419 Page _____ of _____ I.D. NUMBER _____
--	--

SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
1. Monetary Contributions	SMRY, F419, 2,-475,475,0	\$ 12,076.82	\$ 3,502,039.46	\$ 3,514,116.28
2. Loans Received		(475.00)	475.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS		\$ 11,601.82	\$ 3,502,514.46	\$ 3,514,116.28
		0.00	1,095,615.37	1,095,615.37
		\$ 11,601.82	\$ 4,598,129.83	\$ 4,609,731.65
6. Enforceable Promises (Exclude Loan Guarantees, Line 18 below)		(300.00)	1,780.00	1,480.00
7. TOTAL CONTRIBUTIONS RECEIVED		\$ 11,301.82	\$ 4,599,909.83	\$ 4,611,211.65

•
•
•

Since there are twenty line items on the Summary page of Form 419, at the end of this process there will be twenty SMRY records:

SMRY, F419, 1, 12076.82, 3502039.46, 3514116.28
 SMRY, F419, 2, -475,475,0
 SMRY, F419, 3, 11601.82, 3502514.46, 3514116.28
 SMRY, F419, 4, 0, 1095615.37, 1095615.37
 SMRY, F419, 5, 11601.82, 4598129.83, 4609731.65
 SMRY, F419, 6, -300, 1780, 1480
 SMRY, F419, 7, 11301.82, 4599909.83, 4611211.65
 SMRY, F419, 8, 24085, 3612955.99, 3637040.99
 SMRY, F419, 9, 0, 0, 0
 SMRY, F419, 10, 24085, 3612955.99, 3637040.99

```

SMRY,F419,11,100816.76,27257.94,128074.70
SMRY,F419,12,124901.76,3640213.93,3765115.69
SMRY,F419,13,10420.41,,
SMRY,F419,14,11601.52,,
SMRY,F419,15,2365.52,,
SMRY,F419,16,24085,,
SMRY,F419,17,302.75,,
SMRY,F419,18,0,,
SMRY,F419,19,0,,
SMRY,F419,20,128074.70,,

```

Note: those columns that
aren't required are left blank

At this point the filing should look like this:

```

HDR,CAL,CA,1.00,VENDOR SOFT,100
CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower
Street,,Los Angeles,CA,90017,2134894799, , ,Tould,David L., , ,55 S. Tower Street , ,Los
Angeles,CA,90017,2134894799, , ,N,Y,
N,English For The Children , 227,,,,,,,,,,,,,O
CVR3,F419,TRE,19991231, "LOS ANGELES, CA", TOULD,DAVID, ,
CVR3,F419,OFF,19991231, "LOS ANGELES, CA",IRT,PHIL D., ,
CVR3,F419,OFF,19991231, "LOS ANGELES, CA", BELLUM,SARA,,
SMRY,F419,1,12076.82,3502039.46,3514116.28
SMRY,F419,2,-475,475,0
SMRY,F419,3,11601.82,3502514.46,3514116.28
SMRY,F419,4,0,1095615.37,1095615.37
SMRY,F419,5,11601.82,4598129.83,4609731.65
SMRY,F419,6,-300,1780,1480
SMRY,F419,7,11301.82,4599909.83,4611211.65
SMRY,F419,8,24085,3612955.99,3637040.99
SMRY,F419,9,0,0,0
SMRY,F419,10,24085,3612955.99,3637040.99
SMRY,F419,11,100816.76,27257.94,128074.70
SMRY,F419,12,124901.76,3640213.93,3765115.69
SMRY,F419,13,10420.41,,
SMRY,F419,14,11601.52,,
SMRY,F419,15,2365.52,,
SMRY,F419,16,24085,,
SMRY,F419,17,302.75,,
SMRY,F419,18,0,,
SMRY,F419,19,0,,
SMRY,F419,20,128074.70,,

```

RCPT Definition

Schedule A Contributions

The following table identifies all the fields that compose a RCPT record type for FORM 419 form type A

Field Position in Record	Indicates whether the field is Required (R) Absolutely Required(Rx) Conditional Required (C) Absolutely ⁴ Conditional Required (Cx)	Field Name	Maximum length in characters	Description/Values
01	Rx	REC_TYPE	4	Record Type Value: RCPT
02	Rx	FORM_TYPE	6	Schedule Name/ID
03	Rx	TRAN_ID	24	Transaction ID - permanent value unique to this item
04		RPTNO_MADE	3	Value 0-999 - report when this item created (optional)
05		RPTNO_VOID	3	Value 1-999 - report when this item voided (optional)
06	R	ENTITY_CD	3	Values: (Refer to Entity Code List)
07	C	CTTRIB_NAML	200	Contributor's Last name
08	C	CTTRIB_NAMF	45	Contributor's First name
09		CTTRIB_NAMT	10	Contributor's Prefix or Title
10		CTTRIB_NAMS	10	Contributor's Suffix
11	C	CTTRIB_ADR1	45	Address of Contributor
12		CTTRIB_ADR2	45	Optional 2nd line of Address
13	C	CTTRIB_CITY	30	City
14	C	CTTRIB_ST	2	State code
15	C	CTTRIB_ZIP4	10	Zip+4
16	C	CTTRIB_EMP	200	Employer (Sched A, C, D - Req if Entity = 'IND')
17	C	CTTRIB_OCC	60	Occupation (Sched A, C, D - Req if Entity = 'IND')
18		CTTRIB_SELF	1	Check Box: Self Employed?
19		TRAN_TYPE	1	Transaction Type - Values: T=Third Party Repayment
20	R	RCPT_DATE	8	Date item Received (or Begin date of date range)
21		DATE_THRU	8	End-date of date range for Items received
22	R	AMOUNT	12	Amount (Monetary/Inkind/Promise) Received
23	C	AGGREGATE	12	Aggregate YTD Amount (Sched A,C,D,401A)
24	C	CUM_AMT1	12	Cumulative Amount 1 / Prim/Runoff/Spec (Sched A,C,D)
25	C	CUM_AMT2	12	Cumulative Amount 2 / General (Sched A,C,D)
26	C	PROM_AMT	12	Amount Promised (Sched D)
27	C	CTTRIB_DSCR	90	Description of Goods/Svcs Rcvd. (Sched C, I)
28	R	CMTE_ID	7	Committee ID (If 'RCP' & no ID#, Treas info REQ)
29	C	TRES_NAML	200	Treasurer's Last name (If 'COM' & no ID#, REQ)
30	C	TRES_NAMF	45	Treasurer's First name (If 'COM' & no ID#, REQ)
31		TRES_NAMT	10	Treasurer's Prefix or Title
32		TRES_NAMS	10	Treasurer's Suffix
33	C	TRES_ADR1	45	Treasurer Address (If 'COM' & no ID#, REQ)
34		TRES_ADR2	45	" "
35	C	TRES_CITY	20	" "
36	C	TRES_ST	2	" "
37	C	TRES_ZIP4	10	" "
38		INTR_NAML	200	Intermediary's Last name
39		INTR_NAMF	45	Intermediary's First name

⁴ The system will reject the filing and stop the upload process.

40		INTR_NAMT	10	Intermediary's Prefix or Title
41		INTR_NAMS	10	Intermediary's Suffix
42	C	INTR_ADR1	45	Intermediary Addr
43		INTR_ADR2	45	" "
44	C	INTR_CITY	20	" "
45	C	INTR_ST	2	" "
46	C	INTR_ZIP4	10	" "
47	C	INTR_EMP	200	Employer (Sched A, C, D)
48	C	INTR_OCC	60	Occupation (Sched A, C, D)
49		INTR_SELF	1	Check Box: Self Employed?---
50	C	CAND_NAML	200	Candidate's Last name
51	C	CAND_NAMF	45	Candidate's First name
52		CAND_NAMT	10	Candidate's Prefix or Title
53		CAND_NAMS	10	Candidate's Suffix
54	C	OFFICE_CD	3	Office Sought (See table of code in Overview)
55	C	OFFIC_DSCR	30	Office Sought Description (Req if Office_Cd=OTH)
56	C	JURIS_CD	3	Office Jurisdiction Code Values: STW=Statewide;
57	C	JURIS_DSCR	30	Office Jurisdiction Descrip
58	C	DIST_NO	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
59		OFF_S_H_CD	1	Office Sought/Held Code: H=Held; S=Sought
60		BAL_NAME	200	Ballot Measure Name
61		BAL_NUM	7	Ballot Number or Letter
62		BAL_JURIS	40	Jurisdiction
63	C	SUP_OPP_CD	1	Support/Oppose? Values: S; O (F401)
64		MEMO_CODE	1	Memo Amount? (Date/Amount are informational only)
65		MEMO_TEXT	90	Memo Text.

Constructing the RCPT Schedule A Contributions

The construction of this record is the same as with pervious record types

Fields (1,2) Begin the record by identifying its record type and form type with the following:

RCPT, A,

Field (3) Set TRAN_ID Transaction ID unique within the filing and there must be one for every line item. If a line item is changed at a latter date, its original TRAN_ID must be used here.

RCPT, A,1A

Field (4) Set RPTNO_MADE Reserved for Secretary of State use. Set to 0:

RCPT, A,1A, 0 ,

Field (5) Set RPTNO_VOID Reserved for Secretary of State use. Set to 0:

RCPT, A,1A, 0 ,0

Field (6) Set ENTITY_CD

RCPT, A,1A,0,0,IND

Schedule A **Monetary Contributions Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from _____ through _____	CALIFORNIA 1994 FORM 419 Page _____ of _____
--	---

SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

I.D. NUMBER

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
2/3/99	Eve O. Iution 2350 Jackson St Cool CA 95628	Teacher San Juan School District	\$100.00	\$100.00
3/3/99	Dan Druff 1212 Long Drive Cucamonga , CA 91730	Software Engineer MicroMind	\$120.00	\$300.00
4/4/99	Bill Board 101 Oakcreek Circle Fair Oaks, CA 95628	Doctor Fair Oaks Medical	\$5,000.00	\$5,000.00
4/2/99	Joe M. Ama 82 D St. Sacramento, CA 95632	Cook Sam's Grill	\$10.00	\$10.00
SUBTOTAL			\$ 5,220.00	

Monetary Contributions Summary

- Amount received this period — contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 5,220.00
- Amount received this period — contributions of less than \$100.
(Do not itemize.) \$ 10.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL** \$ 5,220.00

Field(7..15) Set CTRIB_NAML,CTRIB_NAMF,CTRIB_NAMT,CTRIB_NAMS,CTRIB_ADR1,CTRIB_ADR2, CTRIB_CITY,CTRIB_ST,CTRIB_ZIP4
 RCPT, A,1A,0,0,IND,Lution,Eve O., ,2350 Jackson St.,Cool,CA,95628,

Fields 7..15

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
2/3/99	Eve O. Lution 2350 Jackson St Cool CA 95628	Teacher San Juan Unified School	\$100.00	\$100.00

Field(16,17) Get CTRB_EMP (contributor's employer) and CTRB_OCC(contributor's occupation):
 RCPT, A,1A,0,0,IND,Lution,Eve O., ,2350 Jackson St.,Cool,CA,95628,San Juan Unified School,Teacher,

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
2/3/99	Eve O. Lution 2350 Jackson St Cool CA 95628	Teacher San Juan Unified School	\$100.00	\$100.00

Field(18) Get CTRB_SELF (self employed) flag:

RCPT, A,1A,0,0,IND,Lution,Eve O., ,2350 Jackson St.,Cool,CA,95628,San Juan Unified School,Teacher, **N**

Field(19) TRAN_TYPE set to:

RCPT, A,1A,0,0,IND,Lution,Eve O., ,2350 Jackson St.,Cool,CA,95628,San Juan Unified School,Teacher,N,**T**

RCPT, A,1A,0,0,IND,Lution,Eve O., ,2350 Jackson St, ,Cool,CA,95628,San Juan Unified School,Teacher,N,T,

Field 23

Fields 20. .22

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
2/3/99	Eve O. Iudion 2350 Jackson St Cool CA 95628	Teacher San Juan Unified School	\$100.00	\$100.00

RCPT, A,1A,0,0,IND,Lution,Eve O., , 2350 Jackson St, ,Cool,CA,95628,San Juan Unified
School,Teacher,N,T,19990203,,100,100,,,

```
RCPT, A,1A,0,0,IND,Lution,Eve O. , ,2350 Jackson St, ,Cool,CA,95628,San Juan Unified
School,Teacher,N,T,19990203,,100,100,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
RCPT, A,2A,0,0,IND,Druff,Dan,, ,1212 Long Drive,,Cucamonga,CA,91730,MicroMind,   Software
Engineer,N,T,19990303,,120,300,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
RCPT, A,3A,0,0,IND,Board,Bill , ,101 Oakcreek Circle,,Fair Oaks,   CA,95628,Fair Oaks Medical Center,
Doctor,N,T,19990404,,5000,5000,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
RCPT, A,4A,0,0,IND,Ama,Joe M., ,82 D St   ,Sacramento,CA,95628,Sam's Grill,
Cook,N,T,19990402,,10,10,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
```

To complete this form, a SMRY record is created for each numbered line item.

		SUBTOTAL \$		\$5,220.00
--	--	-------------	--	------------

Monetary Contributions Summary

1. Amount received this period — contributions of \$100 or more. (Include all Schedule A subtotals.)	\$5,220.00
2. Amount received this period — contributions of less than \$100. (Do not itemize.)	10.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$ 5230.00

SMRY,A,1,5220,,
SMRY,A,2,10,,
SMRY,A,3,5230,,

At this point the filing should look like this:

HDR,CAL,CA,1.00,VENDOR SOFT,100

CVR,F419,71609,COM,CITIZENS FOR AN EDUCATED AMERICA,0,19990505,SA,19980701,19981231,, 55 S. Tower Street,,Los Angeles,CA,90017,2134894799, , ,Tould,David L., , ,55 S. Tower Street , ,Los Angeles,CA,90017,2134894799, , ,N,Y, N,English For The Children , 227,,,,,,,,,O
CVR3,F419,TRE,19991231, "LOS ANGELES, CA", TOULD,DAVID, ,
CVR3,F419,OFF,19991231, "LOS ANGELES, CA",IRT,PHIL D.,,
CVR3,F419,OFF,19991231, "LOS ANGELES, CA", BELLUM,SARA,,
SMRY,F419,1,12076.82,3502039.46,3514116.28
SMRY,F419,2,-475,475,0
SMRY,F419,3,11601.82,3502514.46,3514116.28
SMRY,F419,4,0,1095615.37,1095615.37
SMRY,F419,5,11601.82,4598129.83,4609731.65
SMRY,F419,6,-300,1780,1480
SMRY,F419,7,11301.82,4599909.83,4611211.65
SMRY,F419,8,24085,3612955.99,3637040.99
SMRY,F419,9,0,0,0
SMRY,F419,10,24085,3612955.99,3637040.99
SMRY,F419,11,100816.76,27257.94,128074.70
SMRY,F419,12,124901.76,3640213.93,3765115.69
SMRY,F419,13,10420.41,,
SMRY,F419,14,11601.52,,
SMRY,F419,15,2365.52,,
SMRY,F419,16,24085,,
SMRY,F419,17,302.75,,
SMRY,F419,18,0,,
SMRY,F419,19,0,,
SMRY,F419,20,128074.70,,

Header Record

RCPT, A,1A,0,0,IND,Lution,Eve O., , ,2350 Jackson St, ,Cool,CA,95628,San Juan Unified
School,Teacher,N,T,19990203,,100,100,,,
RCPT, A,2A,0,0,IND,Druff,Dan,, ,1212 Long Drive,,Cucamonga,CA,91730,MicroMind, Software
Engineer,N,T,19990303,,120,300,,,
RCPT, A,3A,0,0,IND,Board,Bill , ,101 Oakcreek Circle,,Fair Oaks, CA,95628,Fair Oaks Medical Center,
Doctor,N,T,19990404,,5000,5000,,,
RCPT, A,4A,0,0,IND,Ama,Joe M., ,82 D St , ,Sacramento,CA,95628,Sam's Grill,
Cook,N,T,19990402,,10,10,,,
SMRY,A,1,5220,,
SMRY,A,2,10,,
SMRY,A,3,5230,,

This is the Schedule A section just constructed

All other records follow the same process for construction as shown above.

Appendix A – California Electronic Filing Format

California File .CAL Layouts
=====

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* O V E R V I E W *

In accordance with the requirements of SB 49, the Secretary of State (SOS) is required to define standardized record format or formats for transmission by the filing community of data required to be filed electronically under SB 49. The SOS will accept test files from vendors to ensure compliance and compatibility with these formats, and publish a list of the certified vendors or other parties who have successfully filed test reports with us.

This document contains the design definition of the California Electronic Filing Format for the electronic filing of California Campaign and Lobbyist Documents. This format defines the order and contents of the electronic filing data files that will be accepted and processed by the State of California's Candidate and Lobbyist Automated Information Management System (CLAIMS). This filing format has been developed to meet the specific requirements of SB 49 to implement electronic filing of these documents and to disclose this data to the public over the Internet. The specific layout of the format is derived from the data requirements of the forms themselves and experience gained implementing similar systems in other venues.

This filing format is being used as the basis for the design of the CLAIMS system and will be used to receive filings from filing software that use the ".CAL" format. Like all software development integration efforts of this type, it is anticipated that minor problems will be found with the format. Please submit problem reports related to any potential problems to dhulse@ss.ca.gov

The filing format is in the public domain and is non-proprietary. There are no intellectual property limitations associated with the filing format. The format is administered by the SOS and all changes or corrections to the format will be managed by the SOS. Proposed filing formats are provided for the following forms:

CAMPAIGN

=====

400	Statement of Organization (Slate Mailer Organization)
401	Slate Mailer Organization Campaign Statement
402	Statement of Termination (Slate Mailer Organization)
405	Amendment to Campaign Disclosure Statement
410	Statement of Organization Recipient Committee
415	Recipient Committee Statement of Termination
416	Officeholder and Candidate Statement of Termination
419	Ballot Measure Committee Campaign Disclosure Statement - Long Form
420	Recipient Committee CAMPAIGN STATEMENT - LONG FORM
425	Semi-Annual Statement of no Activity
450	Recipient Committee Campaign Disclosure Statement - Short Form
461	Independent Expenditure Committee and Major Donor Committee Campaign Statement
465	Supplemental Independent Expenditure Report
470	Officeholder and Candidate Campaign Statement - Short Form
490	Officeholder, Candidate, and Controlled Committee Campaign Statement - Long Form
495	Supplemental Pre-Election Campaign Statement
496	Late Independent Expenditure Report
497	Late Contribution Report

LOBBYIST

=====

601	Lobbying Firm Registration Statement
602	Lobbying Firm Activity Authorization
603	Lobbyist Employer or Lobbying Coalition Registration Statement
604	Lobbyist Certification Statement
605	Amendment to Registration, Lobbying Firm, Lobbyist Employer, Lobbying Coalition
606	Notice of Termination
607	Notice of Withdrawal
615	Lobbyist Report
625	Report of Lobbying Firm
630	Payments Made to Lobbying Coalitions (Attachment to Form 625 or 635)
635	Report of Lobbyist Employer or Report of Lobbying Coalition
635-C	Payments Received by Lobbying Coalitions
640	Governmental Agencies Reporting (Attachment to Form 635 or Form 645)
645	Report of Person Spending \$5,000 or More
690	Amendment to Lobbying Disclosure Report

Each .CAL file starts with "Header" lines. Various header information records are appended to the beginning of a .CAL file and are bracketed by [Header] and [End Header] records. A user or vendor can create the necessary Header records themselves or a utility program named HdrGenr.EXE/DLL that is supplied by the SOS will create these automatically. The HdrGenr program creates the Header lines based on variables in an .INI file and on the contents of a "headerless" .CAL file.

The first record following the [Header] / [End Header] section must be a short CSV (comma-separated-value) record identified with the text "HDR" in the first field and "CAL" in the second field. This "HDR" record is also generated by the HdrGenr utility if not already present in the .CAL file. The HdrGenr utility program first looks for field values from an existing "HDR" record. It then uses any settings in the HdrGenr.Ini file, and in some cases will set defaults for certain fields when values cannot be found in either the "HDR" or the HdrGenr.Ini file.

The filing database program is responsible for creating the various record types described in this document. It will assemble them into a single (.CAL) file with a HDR record, immediately followed by a CVR (Cover) record, followed by a number of other record types (e.g. CVR2, CVR3, SMRY, RCPT, EXPN,...) as required by a particular type of filing. The specific record types that are should be included after the HDR and CVR records of each type of filing (e.g. F419, F420, F490, F615, F625, F635, ...) are listed at the beginning of each of the four Filing Sections later in this document.

The following is an example of the required "Header" information that precedes the CSV (Comma Separated Values) portion of an electronic filing. It can be created by running HdrGenr.EXE/DLL on the CSV portion of a .CAL file or can be created directly from a database program.

----- Example of a Header for a F490 filling -----

[Header]	(this exact text must begin in column 1)
State_Cd,CA	(Required. From HDR, field #3 or HdrGenr.Ini)
CAL_Ver,1.00	(Required. From HDR, field #4 or HdrGenr.Ini)
Soft_Name,"Vendor Pgm Name"	(Required. From HDR, field #5 or HdrGenr.Ini)
Soft_Ver,1.00	(Required. From HDR, field #6 or HdrGenr.Ini)
Form_Type,F490	(Required. From CVR, field #2 or HdrGenr.Ini)
Filer_ID,123456	(Required. From CVR, field #3 or HdrGenr.Ini)
Entity_Cd,CAN	(Required. From CVR, field #4 or HdrGenr.Ini)
Filer_Name,"Candidate Name"	(Required. From CVR, field #5 or HdrGenr.Ini)
RecTally,CVR2,F490,2	(Record Type counts for a F490 filing)
RecTally,CVR3,F490,2	"
RecTally,SMRY,F490,22	"
RecTally,SMRY,AP1,1	"
RecTally,SMRY,AP2,1	"
RecTally,SMRY,A,3	"
RecTally,SMRY,A-1,1	"
RecTally,SMRY,C,4	"
RecTally,SMRY,D,7	"
RecTally,SMRY,I,4	"
RecTally,SMRY,B1,3	"
RecTally,SMRY,B2,8	"
RecTally,SMRY,B3,1	"
RecTally,SMRY,E,5	"
RecTally,SMRY,F,5	"
RecTally,SMRY,G,1	"
RecTally,SMRY,H1,3	"
RecTally,SMRY,H2,8	"
RecTally,SMRY,H3,1	"
RecTally,ALOC,AP1,1	"
RecTally,ALOC,AP2,1	"
RecTally,RCPT,A,99999	"
RecTally,RCPT,C,99999	"
RecTally,RCPT,D,99999	"
RecTally,RCPT,I,99999	"
RecTally,EXPN,E,99999	"
RecTally,EXPN,F,99999	"
RecTally,EXPN,G,99999	"
RecTally,LOAN,B1,99999	"
RecTally,LOAN,B2,99999	"
RecTally,LOAN,B3,99999	"
RecTally,LOAN,H1,99999	"
RecTally,LOAN,H2,99999	"
RecTally,LOAN,H3,99999	"
[End Header]	

Note: The following layouts use 'Rx', 'R', 'Cx' & 'C' to indicate if a field is (R)equired or (C)onditionally required. If required {or conditionally required} and data is missing, the 'x' indicates whether this results in a filing being "Rejected" by the agency.

'Rx' = (R)equired field; SOS "Rejects" filing (Level-8)
 'R' = (R)equired field, but SOS "Accepts" filing (Level-4)
 'Cx' = (C)ond Required field; SOS "Rejects" filing (Level-8)
 'C' = (C)ond Required field, but SOS "Accepts" filing (Level-4)

Header Record Layout (common to all CAL filing types)

=====

R{x}	Field Name	Max Len	Description
# C{x}			
01 Rx	Rec_Type	3	Record Type. Value: HDR
02 Rx	EF_Type	3	Electronic Filing Type (aka Form_Type) Value: CAL
03 Rx*	State_Cd	2	State Code. Value: CA
04 Rx*	CAL_Ver	4	CAL Version #. Value: 1.00
05 Rx*	Soft_Name	90	Filer Software Name
06 Rx*	Soft_Ver	16	Filer Software Version #
07	Name_Delim	1	Internal Delimiter used in Name Fields. Default value is "^" (caret symbol).

* Note: The values contained in Fields #3 - #6 (if not supplied in the HDR record by the Filer database software), are set by the values contained in the HdrGenr.ini file and are inserted in the HDR record that is generated by the HdrGenr utility.

NOTES ABOUT CERTAIN FIELD TYPES
=====

E.F (.CAL) files are not case sensitive. Rec_Type, Form_Type and all "code" fields (e.g. Entity_Cd, Yes/No fields, Check-box fields), can have values represented in any mix of UPPERCASE or lowercase letters." It is important that software that generates "CAL" files prevent any fields from containing "leading spaces" (e.g. " Text information" has a leading space before the word Text). Fields with leading spaces are not allowed.

DATES

All date fields must be in CCYYMMDD format. Dates are always coded as 8-digit fields in Century, Year, Month, & Day order.

AMOUNTS

Monetary amounts are stored with an "explicit" decimal point, which, when coded, must be followed by exactly 2 decimal (cents) positions.

Examples:

123.45 = \$123.45
345 = \$345.00
567.8 (invalid)

RATES & PERCENTS

Rates & Percents are expressed as "freeform" text. When a Loan or Investment is expressed in terms of a "rate", the value should be represented with an explicit decimal point (e.g. 0.056). If the same "rate" is expressed as a percentage, the % symbol should be used. A rate of 0.056 would be expressed as 5.6%. There are times when rates are variable and expressed as "prime + 1%" or perhaps "15% + applicable T-bill". Percents/Rates are carried in "CAL" files in fields of up to 30-characters.

NAMES

Names are carried in 4 explicitly defined fields:

- 1) Last Name is a 200 character field which is used for a person's last name or is used for the complete name of a non-person entity such as a committee, business, ballot measurer name, etc.
- 2) First name is a 45 character field which is used to store a person's first name and any middle name(s) and/or initials. For a person, it's all the names excepting the Last Name or surname.
- 3) Title (or prefix) is used for titles used by a person such as Mr, Mrs, Ms, Hon, Rep, Sen, Dr, and so on. Up to 10 characters are allowed.
- 4) Suffix is used for a person's suffix such as Jr, Sr, II, III, Esquire, etc. As many as 10 characters are allowed.

ADDRESSES

Addresses must contain a complete street address, city, state, and a 5-digit (or optionally a Zip+4) ZIP Code. In other words, a complete mailing address must be supplied when address is required.

"CAL" records allow for 2 lines of street address (in addition to the fields for City, State, and ZIP Code). When only one line of Street address is given, it should be coded in the Address1 field and the Address2 field should be blank.

Zip Codes & Zip +4

Zip Codes are defined as a maximum of 10 characters. Zip Codes can be stored as 5-digit, 9-digit, or as 5-digit/hyphen/4-digit values.

PHONE NUMBERS

Phone numbers are coded "freeform" in a 20-character Phone field. Any special instructions (e.g. select #3 from the menu) and/or extension numbers should be included in Phone number fields.

YES/NO BOX PAIRS

Yes/No Boxes are represented on Forms and Schedules as two separate boxes. They are mutually exclusive in their use, however if a filer checks both boxes in a Yes/No group, this should be interpreted the same as if neither box is checked. The results are stored in a single field in the Electronic File - the only acceptable values in a Yes/No field are blank, "Y" and "N".

SINGLE CHECK-BOXES

Check-box fields differ from Yes/NO Boxes. Check-boxes reflect either a "positive" response (i.e. the filer has put a check-mark, an "X" or some other kind of marking in the Box), or "no response". The lack of a mark in a Check-box means only that a "positive" response HAS NOT been made. It does not indicate a "negative" response - the filer might have ignored the Check-box on the form.

In electronic filing, Check-box fields are coded with an "X" to indicate that the item on the form was "checked". Nothing is coded when the item was not "checked".

CHECK-BOXES GROUPS

Forms often have groups of Check-boxes where only one box can be checked. These are called "mutually exclusive" Check-box groups. The convention used in "CAL" files is to define a single field to represent a group of mutually-exclusive Check-boxes on a paper form. Code values are defined to represent each possible selection (e.g. [1|2|3|...] or [A|B|C|...]).

Note: The convention in MS Windows is to offer mutually exclusive choices with what are called "radio buttons".

Note: The convention in "CAL" is to define a separate field for each check-box which is not part of a mutually exclusive group.
(see Single Check-boxes above).

ENTITY CODES USED ON FORMS & SCHEDULES

The following Entity Codes are used to indicate various kinds of persons and committees on "cover" forms CVR record types:

CAO - Candidate/Office-holder	(F490, F465, F496, F497)
CTL - Controlled Committee	(F490, F465, F496, F497)
RCP - Recipient Committee	(F420, F425, F450, F465, F496, F497)
SMO - Slate Mailer Organization	(F401)
BMC - Ballot Measure Committee	(F419, F450, F465, F496, F497)
MDI - Major Donor/Independent Expenditure	(F461, F465, F496, F497)

The following Entity Codes are used to indicate various kinds of persons on "Additional Name/Address" CVR2 record types:

POF - Principal Officer	(F400, F410, F465)
CAO - Candidate/Office Holder	(F410)
PRO - Proponent	(F410)
SPO - Sponsor	(F410)
BNM - Ballot Measure's Name/Title	(F410)
ATH - Authorizing Individual	(F400)
COM - Committee	(F400)
CTL - Controlled Committee	(F410)
RCP - Recipient Committee	(F400)

The following CVR2 'Item_Codes' indicate which Section within F400 & F410 reports the Entity is to be listed:

POF - (Item_Cd)	Principal Officer (F400, F410)
CTL - (Item_Cd)	Controlled Committee (F410)
PFC - (Item_Cd)	Primarily Formed Committee Item (F410)
SPO - (Item_Cd)	Sponsored Committee Itemization (F410)
SMA - (Item_Cd)	Slate Mailer Authorizer (F400)
013 - (Item_Cd)	82013 Committee (F400)

The following Entity Codes are used to indicate various kinds of persons on "verification" CVR3 record types:

TRE - Treasurer
CAO - Candidate/Office Holder
OFF - Officer (Responsible)
PRO - Proponent (OK if F419)
SPO - Sponsor (OK if F420)

The following Entity Codes are used to indicate various kinds of persons and orgs. on various schedules including RCPT, EXPN, and LOAN record types:

RCP - Recipient Committee
IND - Individual
OTH - Other

OFFICE CODES USED ON FORMS & SCHEDULES

Statewide Offices

GOV - Governor
LTG - Lieutenant Governor
SOS - Secretary of State
CON - State Controller
ATT - Attorney General
TRE - State Treasurer
INS - Insurance Commissioner
SUP - Superintendent of Public Instruction

State District Offices

SEN - State Senator
ASM - State Assembly Person
BOE - Board of Equalization Member

City, County and Local Offices

ASR - Assessor
BED - Board of Education
BSU - Board of Supervisors
CAT - City Attorney
CCB - Community College Board
CCM - City Council Member
COU - County Counsel
CSU - County Supervisor
CTR - Local Controller
DAT - District Attorney
MAY - Mayor
PDR - Public Defender
PLN - Planning Commissioner
SHC - Sheriff-Coroner
SCJ - Superior Court Judge
TRS - Local Treasurer

Miscellaneous / Other

OTH - Other

AMENDMENT PROCESSING OF ITEMS IN SCHEDULES

Tran_ID: A unique identifier permanently associated with each itemization or transaction appearing in a CAL electronic file. If a given itemization appears in more than one schedule (e.g. an inkind contribution is listed in both schedules A and E or A and C) then the Tran_ID associated with that itemization can either have the same value or different values for that single item among the various schedules. However, the Tran_ID assigned to an itemization in an amended report that appeared in a prior report must match. Additionally, no Tran_ID used in one original report can ever be assigned to an itemization appearing in a subsequent report.

The Tran_ID assigned and maintained by the filer's software is used by the California SOS's database to uniquely identify each itemization from every schedule and from every filer. It is critically important that when a filer amends a previously filed electronic report, the Tran_ID's of the subsequent amendment match those already reported. Also, no Tran_ID of a new report can match one already used on a previous original report.

Two other fields named RptNo_Made and RptNo_Void fields are used by CLAIMS in its implementation of amendment processing. Their values are determined by CLAIMS based on a comparison of the contents of an amended electronic report with those transactions already held on the CLAIMS database. These two fields may be submitted by the filer, but the CLAIMS system will ignore them and determine their contents from its own data.

RptNo_Made: (Values 0 - 999) Any number > zero means that this transaction was added (created) in amendment #1 - #999. This field can be used by the vendor to show which report (original or amendment) an itemization first appeared. This field is assigned by CLAIMS based on matching done on the Tran_ID in the CAL electronic file and the transaction identifiers in the CLAIMS database. Its use by vendors is optional.

RptNo_Void: (Values 0 - 999) Any number > zero means that this transaction was flagged as a voided (deleted) in amendment #1 - #999. This field can be used by the vendor to show which report (original or amendment) an item was 'voided' or flagged as deleted. This field is assigned by CLAIMS based on matching done on the Tran_ID in the CAL electronic file and the transaction identifiers in the CLAIMS database. Its use by vendors is optional.

MEMO CODE AND MEMO TEXT FIELDS

Memo Code and Text fields are defined on Receipt (RCPT) and Expense (EXPN) records. The Memo Text fields are optionally used to carry any kind of explanatory words that the filer deems necessary. This text is in addition to, and does not replace other fields on the RCPT/EXPN records.

The Memo Code field is used to indicate that any Date/Amount values in the RCPT/EXPN record are "informational" only and do not count toward any Summary Page aggregates.

S e c t i o n 1 - C a m p a i g n D i s c l o s u r e R e p o r t s

401 Slate Mailer Organization Campaign Statement
405* Amendment to Campaign Disclosure Statement
419 Ballot Measure Committee Campaign Disclosure Statement - Long Form
420 Recipient Committee CAMPAIGN STATEMENT - LONG FORM
425 Semi-Annual Statement of no Activity
450 Recipient Committee Campaign Disclosure Statement - Short Form
461 Independent Expenditure Committee and Major Donor Committee
Campaign Statement
465 Supplemental Independent Expenditure Report
470 Officeholder and Candidate Campaign Statement - Short Form
490 Officeholder, Candidate, and Controlled Committee Campaign
Statement - Long Form
495* Supplemental Pre-Election Campaign Statement
496 Late Independent Expenditure Report
497 Late Contribution Report

* The 405 and 495 forms are not filed as stand-alone filings, but are
instead included within other filings such as 419, 420, 490, ...).

Electronic File Components by Filing Type

=====

RecType	FormName	Description
-----	-----	-----
HDR	CAL	"CAL" Header record
CVR	F419	Cover Page; Ballot Measure Committee
CVR3	F419	Cover Page; Part III; Verification info
F405	F419	Amendment Information sheet (aka Form 405)
F495	F419	Supplemental Pre-Election Statement (aka Form 495)
SMRY	F419...	Summary Page & Misc. Schedule Line-item [sub]totals
ALOC	AP	Allocation Page
RCPT	A	Schedule A Contributions
RCPT	C	Schedule C Non-Monetary Contributions
RCPT	D	Schedule D Promised moneys
RCPT	I	Schedule I Miscellaneous
EXPN	E	Expenditures
EXPN	F	Accrued (Unpaid) Expenditures
EXPN	G	Expenditures "on behalf" of another Committee
LOAN	B1	Loan Received
LOAN	B2	Loan - Repayment Made
LOAN	B3	Loan - Unpaid Balance
LOAN	H1	Loan Made
LOAN	H2	Loan - Repayment Received
LOAN	H3	Loan - Unpaid Balance
HDR	CAL	"CAL" Header record
CVR	F420	Cover Page; Recipient Committee
CVR2	F420	Cover Page; Part II; Additional Committees
CVR3	F420	Cover Page; Part III; Verification info
F405	F420	Amendment Information sheet (aka Form 405)
F495	F420	Supplemental Pre-Election Statement (aka Form 495)
SMRY	F420...	Summary Page & Misc. Schedule Line-item [sub]totals
ALOC	AP	Allocation Page
RCPT	A	Schedule A Contributions
RCPT	C	Schedule C Non-Monetary Contributions
RCPT	D	Schedule D Promised moneys
RCPT	I	Schedule I Miscellaneous
EXPN	E	Expenditures
EXPN	F	Accrued (Unpaid) Expenditures
EXPN	G	Expenditures "on behalf" of another Committee
LOAN	B1	Loan Received
LOAN	B2	Loan - Repayment Made
LOAN	B3	Loan - Unpaid Balance
LOAN	H1	Loan Made
LOAN	H2	Loan - Repayment Received
LOAN	H3	Loan - Unpaid Balance

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F490	Cover Page; Candidate Committee
CVR2	F490	Cover Page; Part II; Additional Committees
CVR3	F490	Cover Page; Part III; Verification info
F405	F490	Amendment Information sheet (aka Form 405)
F495	F490	Supplemental Pre-Election Statement (aka Form 495)
SMRY	F490...	Summary Page & Misc. Schedule Line-item [sub]totals
ALOC	AP1	Allocation from Campaign Funds
ALOC	AP2	Allocation from Personal Funds
RCPT	A	Schedule A Contributions
RCPT	A-1	Schedule A-1 Contribs Trans to Spec Election Cmtte
RCPT	C	Schedule C Non-Monetary Contributions
RCPT	D	Schedule D Promised moneys
RCPT	I	Schedule I Miscellaneous
EXPN	E	Expenditures
EXPN	F	Accrued (Unpaid) Expenditures
EXPN	G	Expenditures "on behalf" of another Committee
LOAN	B1	Loan Received
LOAN	B2	Loan - Repayment Made
LOAN	B3	Loan - Unpaid Balance
LOAN	H1	Loan Made
LOAN	H2	Loan - Repayment Received
LOAN	H3	Loan - Unpaid Balance
HDR	CAL	"CAL" Header record
CVR	F450	Cover Page; Recipient Committee
CVR3	F450	Cover Page; Part III; Verification info
F405	F450	Amendment Information sheet (aka Form 405)
F495	F450	Supplemental Pre-Election Statement (aka Form 495)
SMRY	F450...	Summary Page & Misc Schedule Line-item [sub]totals
EXPN	F450P4	Expenditures & Contributions Made
HDR	CAL	"CAL" Header record
CVR	F461	Cover Page; Ind Expenditure & Major Donor Committee
CVR3	F461	Cover Page; Part III; Verification info
F405	F461	Amendment Information sheet (aka Form 405)
SMRY	F461...	Summary Page & Misc Schedule Line-item [sub]totals
EXPN	F461P5	Expenditures & Contributions Made
LOAN	F461P6	Loan Received (Forgiven & Guaranteed) (like a B1)
LOAN	F461P7	Loan - Repayment Received (something like an H2)

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F401	Cover Page; Slate Mailer Organization
CVR3	F401	Cover Page; Part III; Verification info
SMRY	F401...	Summary Page & Misc. Schedule Line-item [sub]totals
RCPT	F401A	Payments Received
S401	F401B	Payments Made
S401	F401B-1	Payments Made by Agent/Contractor on Behalf of SMO
S401	F401C	"F400" Persons in SMO Receiving \$1000 or more
S401	F401D	Candidates/Measurers not on Sched F401A
HDR	CAL	"CAL" Header record
CVR	F425	Cover Page; Semi Annual Statement of No Activity
CVR3	F425	Cover Page; Part III; Verification info
HDR	CAL	"CAL" Header record
CVR	F465	Cover Page; Supplemental Independent Expenditure Rpt
CVR2	F465	Cover Page; Part V Filing Officer Titles & Addresses
CVR3	F465	Cover Page; Part III; Verification info
SMRY	F465...	Summary Page & Misc. Schedule Line-item [sub]totals
EXPN	F465P4	Independent Expenditures Made
HDR	CAL	"CAL" Header record
CVR	F496	Cover Page; Late Independent Expenditure Report
S496	F496	Independent Expenditures Made
HDR	CAL	"CAL" Header record
CVR	F497	Cover Page; Late Contribution Report
S497	F497P1	Late Contributions Received
S497	F497P2	Late Contributions Made
HDR	CAL	"CAL" Header record
CVR	F470	Cover Page; Officeholder/Cand Short Form & Supplement
CVR2	F470	Cover Page; Part IV; Committee Names & Addresses
CVR3	F470	Cover Page; Part V; Verification info

COVER PAGE RECORD LAYOUT FOR F419,420,490,450,461,401 DICLOSURE REPORTS
 F425 STATEMENT OF NO ACTIVITY
 F465 SUPPLEMENTAL INDEPENDENT EXPENDITURE
 F496,497 LATE CONTRIB/EXPEND REPORTS

=====

R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	3	Record Type Value: CVR
02 Rx		Form_Type	4	Type of Filing or Form set. Values: F419; F420; F490; F450; F461; F401; F425; F465; F496; F497
03 Rx		Filer_ID	7	Committee ID number of Filer
04		Entity_Cd	3	Values: CAO - Candidate/Office-holder (F490,465,496,497) CTL - Controlled Committee (F490,465,496,497) RCP - Recipient Committee (F420,425,450,465,496,497) SMO - Slate Mailer Organization (F401) BMC - Ballot Measure Committee (F419,450,465,496,497) MDI - Major Donor/Independent Expenditure (F461,465,496,497)
05 Rx		Filer_NamL	200	Filer's Last name
06 C		Filer_NamF	45	Filer's First name(s) (Required for persons)
07		Filer_NamT	10	Filer's Prefix or Title
08		Filer_NamS	10	Filer's Suffix
09 Rx		Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999
10 Rx		Rpt_Date	8	Date this report is filed
11 Cx		Stmt_Type	2	Type of Statement - Values: PE = Pre-Election (F419,F420,4F50,F490) SE = Supplemental Pre-elect (F420,F450,F490) SY = Special Odd-Yr Campaign (F420,F450,F490) SA = Semi-annual (F419,F420,F450,F490) TS = Termination Statement (F419,F420,F450,F490) QT = Quarterly Stmt (F419,F450) S1 = Semi-Annual (Jan1-Jun30) (F425) S2 = Semi-Annual (Jul1-Dec31) (F425) L1 = Late Contrib F497, Part I only (F497) L2 = Late Contrib F497, Part II only (F497) L3 = Late Contrib F497, Part I & II (F497) (Null value {not Req} for F461, F401, F465, F496)
12 Cx		From_Date	8	Reporting Period From Date (not Req on F496 & F497)
13 Cx		Thru_Date	8	Reporting Period Thru Date (not Req on F496 & F497)
14 C		Elect_Date	8	Date of the General Election (Req on F419,F420,F450,F461,F465,F490 in even years)

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

=====

R{x}	#	C{x}	Field Name	Max Len	Description
	15	R	Filer_Adr1	45	Address of Filing Entity
	16		Filer_Adr2	45	" " " "
	17	R	Filer_City	30	" " " "
	18	R	Filer_ST	2	" " " "
	19	R	Filer_ZIP4	10	" " " "
	20		Filer_Phon	20	
	21		Filer_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
	22		File_Email	60	Email Address {not mapped to present FPPC forms}
	23	C	Tres_NamL	200	Treasurer or Responsible Officer's Last name (Tres fields #23 - 34 not used on F496 & F497 filings)
	24	C	Tres_NamF	45	Treasurer or Responsible Officer's First name
	25		Tres_NamT	10	Treasurer or Responsible Officer's Prefix or Title
	26		Tres_NamS	10	Treasurer or Responsible Officer's Suffix
	27	C	Tres_Adr1	45	Treasurer or Responsible Officer Address
	28		Tres_Adr2	45	" "
	29	C	Tres_City	20	" "
	30	C	Tres_ST	2	" "
	31	C	Tres_ZIP4	10	" "
	32		Tres_Phon	20	" "
	33		Tres_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
	34		Tres_Email	60	Email Address {not mapped to present FPPC forms}

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS - VARIABLE PORTIONS

Note: Remainder of CVR record starting with Field #36 is parsed depending on the value contained Form_Type.

Note: F401 does not use a variable portion to the CVR page layout.

R{x}	# C{x}	Field Name	Len	Description
----- Variable [F419 465 496] fields follow when Form_Type=[F419 465 496] -----				
35 C		Sponsor_YN	1	Sponsored Committee? Yes/No (Null on F496)
36 C		Sngl_Msr_YN	1	Single Measure? Yes/No (Null on F496)
37 C		Control_YN	1	Controlled Committee Yes/No (Null on F496)
38 C		Bal_Name	200	Ballot Measure Name
39 C		Bal_Num	3	Ballot Number or Letter
40 C		Bal_Juris	30	Jurisdiction of Ballot Measure
41 C		OffHldNamL	200	Candidate/Officeholder's Last name
42 C		OffHldNamF	45	Candidate/Officeholder's First name(s)
43		OffHldNamT	10	Candidate/Officeholder's Prefix or Title
44		OffHldNamS	10	Candidate/Officeholder's Suffix
45 C		Office_Cd	3	Office Sought (See table of code in Overview)
46 C		Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
47 C		Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
48 C		Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
49 C		Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
50		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
51 R		Sup_Opp_Cd	1	Support/Oppose? Values: S; O
----- Variable F420 fields follow when Form_Type=F420 -----				
35 R		Sponsor_YN	1	Sponsored Committee? Yes/No
36 R		BrdBase_YN	1	Broad Based Committee? Yes/No
----- Variable F450 fields follow when Form_Type=F450 -----				
35 R		Sponsor_YN	1	Sponsored Committee? Yes/No
36 R		BrdBase_YN	1	Broad Based Committee? Yes/No
47 R		Control_YN	1	Controlled Committee? Yes/No

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS - VARIABLE PORTIONS (Continued)

=====

R{x}	Field Name	Len	Description
----- Variable F461 fields follow when Form_Type=F461 -----			
35	EmplBus_CB	1	Employer/Business info included check-box
36 C	Bus_Name	200	Name of Employer/Business
37 C	Bus_Adr1	45	Employer/Business Address
38	Bus_Adr2	45	" " "
39 C	Bus_City	20	" " City
40 C	Bus_ST	2	" " State
41 C	Bus_ZIP4	10	" " Zip+4
42 C	Bus_Inter	40	Employer/Business Interests
43	BusAct_CB	1	Business Activity info included check-box
44 C	BusActivity	90	Business Activity description
45	Assoc_CB	1	Association Interests info included check-box
46 C	Assoc_Int	90	Association Interests description
47	Other_CB	1	Other Entity Interests info included check-box
48 C	Other_Int	90	Other Entity Interests description
----- Variable 490 fields follow: (Form_Type=F490) -----			
35 R	Office_Cd	3	Office Sought (See table of code in Overview)
36 C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
37 R	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
38 C	Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
39 C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
40	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
41 R	Cand_NamL	200	Candidate/Officeholder's Last name
42 R	Cand_NamF	45	Candidate/Officeholder's First name
43	Cand_NamT	10	Candidate/Officeholder's Prefix or Title
44	Cand_NamS	10	Candidate/Officeholder's Suffix
45 R	Cand_Adr1	45	Candidate/Officeholder Address
46	Cand_Adr2	45	" "
47 R	Cand_City	20	" City
48 R	Cand_ST	2	" State
49 R	Cand_ZIP4	10	" Zip+4
50	Cand_Phon	20	" Phone
51	Cand_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
52	Cand_Email	60	Email Address {not mapped to present FPPC forms}

COVER PAGE RECORD LAYOUT FOR F470 OFFICEHOLDER/CAND SHORT/SUPPLEMENT

R{x}		Max	
# C{x}	Field Name	Len	Description
-----	-----	---	-----
01 Rx	Rec_Type	3	Record Type Value: CVR
02 Rx	Form_Type	4	Type of Filing or Form set. Value: F470
03 Rx	Filer_ID	7	Committee ID number of Filer
04	Entity_Cd	3	Values: CAO - Candidate/Office-holder
05 Rx	Filer_NamL	200	Filer's Last name
06 R	Filer_NamF	45	Filer's First name(s) (Required for persons)
07	Filer_NamT	10	Filer's Prefix or Title
08	Filer_NamS	10	Filer's Suffix
09 Rx	Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999
10 Rx	Rpt_Date	8	Date this report is filed
11 R	Cand_Adr1	45	Address of Filing Candidate/Officeholder
12	Cand_Adr2	45	" " " "
13 R	Cand_City	30	" " " "
14 R	Cand_ST	2	" " " "
15 R	Cand_ZIP4	10	" " " "
16	Cand_Phon	20	
17	Cand_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
18	Cand_Email	60	Email Address {not mapped to present FPPC forms}
19 R	Office_Cd	3	Office Sought (See table of code in Overview)
20 C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
21 R	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
22 C	Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
23 C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
24	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
25 C	Elect_Date	8	Date of the General Election (Req in even years)
26	Date_1000	8	Date Contribs Totaling 1,000 or more Received

COVER PAGE - {ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT

=====

R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	4	Record Type Value: CVR2
02 Rx		Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F420; F465; F470; F490; {F400; F410 - See Section 2}; {F625; F635 - See Section 3}; {F601; F602; F603 - See Section 4}

Note: Remainder of CVR record is parsed depending on value of Form_Type.

----- Variable F420 {Part II} fields follow when Form_Type=F420 -----

03		Entity_Cd	3	Value: CAO - Candidate/Office-holder
04 R		Cand_NamL	200	Candidate's Last name
05 R		Cand_NamF	45	Candidate's First name
06		Cand_NamT	10	Candidate's Prefix or Title
07		Cand_NamS	10	Candidate's Suffix
08 R		Office_Cd	3	Office Sought (See table of code in Overview)
09 C		Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
10 R		Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
11 C		Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
12 C		Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
13		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
14 R		Sup_Opp_Cd	1	Support/Oppose? Values: S; 0

----- Variable F465 {Part V} fields follow when Form_Type=F465 -----

03		Entity_Cd	3	Values: CAO - Candidate/Office-holder
04 R		Title	90	Official Title of Filing Officer
05 R		Mail_Adr1	45	Address
06		Mail_Adr2	45	Optional 2nd line of Address
07 R		Mail_City	30	City
08 R		Mail_ST	2	State code
09 R		Mail_ZIP4	10	Zip+4

COVER PAGE - {ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Continued)

=====

R{x}	Field Name	Max Len	Description
# C{x}			

----- Variable F490/Part II & F470/Part IV fields when Form_Type=[F490|F470]

03	Entity_Cd	3	Values: COM - Committee CTL - Controlled Committee RCP - Recipient Committee
04 R	Cmte_ID	7	Committee ID
05 R	Cmte_Name	200	Name of Filing Committee
06 R	Cmte_Adr1	45	Address of Filing Committee
07	Cmte_Adr2	45	" " " "
08 R	Cmte_City	30	" " " "
09 R	Cmte_ST	2	" " " "
10 R	Cmte_ZIP4	10	" " " "
11	Cmte_Phon	20	
12	Cmte_FAX	20	FAX Phone Number {not mapped to present FPPC forms}
13	Cmte_Email	60	Email Address {not mapped to present FPPC forms}
14 R	Tres_NamL	200	Treasurer's Last name
15 R	Tres_NamF	45	Treasurer's First name
16	Tres_NamT	10	Treasurer's Prefix or Title
17	Tres_NamS	10	Treasurer's Suffix
18 C	Control_YN	1	Controlled Committee? Yes/No (Req on F490)

COVER PAGE - {ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Continued)

```
=====
R{x}      Max
# C{x} Field Name Len Description
-----
*****
* This definition used in Section 2 *
*****
```

----- Variable fields follow when Form_Type=[F400|F410] -----

```
03 Rx  Entity_Cd      3  Values: POF - Principal Officer (F400, F410)
                                CAO - Candidate/Office-holder (F410)
                                PRO - Proponent (F410)
                                SPO - Sponsor (F410)
                                BNM - Ballot Measure's Name/Title (F410)
                                ATH - Authorizing Individual (F400)
                                COM - Committee (F400)
                                CTL - Controlled Committee (F410)
                                RCP - Recipient Committee (F400)
```

```
04 Rx  Enty_NamL      200 Filing Entity's Last name
05 C   Enty_NamF      45  Filing Entity's First name
06     Enty_NamT      10  Filing Entity's Prefix or Title
07     Enty_NamS      10  Filing Entity's Suffix
```

```
08 Rx  Item_Cd        3  Section of Stmt of Org this Itemization relates to
                                Values: POF - Principal {Filing} Officer (F400, F410)
                                CTL - Controlled Committee Itemization (F410)
                                PFC - Primarily Formed Committee Item (F410)
                                SPO - Sponsored Committee Itemization (F410)
                                SMA - Slate Mailer Authorizer (F400)
                                013 - 82013 Committee (F400)
```

```
09 C   Mail_Adr1      45  Address (if Item_Cd = SPO)
10     Mail_Adr2      45  Optional 2nd line of Address
11 C   Mail_City      30  City (if Item_Cd = SPO)
12 C   Mail_ST        2   State code (if Item_Cd = SPO)
13 C   Mail_ZIP4      10  Zip+4 (if Item_Cd = SPO)
14     Day_Phone      20  Daytime Phone Number
15     FAX_Phone      20  FAX Phone Number
16     Email_Adr      60  Email Address {does not map to present FPPC forms}
17 C   Cmte_ID        7   Committee ID (If Entity_Cd=RCP)
```

----- Fields 18 - 27 used when Item_Cd=[CTL|PFC]

```
18 C   Office_Cd      3   Office Sought (See table of code in Overview)
19 C   Offic_Dscr     30  Office Sought Description (Req if Office_Cd=OTH)
20 C   Juris_Cd       3   Office Jurisdiction Code Values: STW=Statewide;
                                SEN=Senate District; ASM=Assembly District;
                                BOE=Board of Equalization District;
                                CIT=City; CTY=County; LOC=Local; OTH=Other
21 C   Juris_Dscr     30  Off. Juris. Dscrip (Req if Juris_Cd=[CIT|CTY|LOC|OTH])
22 C   Dist_No        3   Office District Number (Req if Juris_Cd=[SEN|ASM|BOE])
```


COVER PAGE - {ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Continued)

```

R{x}
# C{x} Field Name   Len  Description
-----
23      Off_S_H_Cd    1  Office Sought/Held Code:  H=Held; S=Sought
24 C    Party_Name   200  Name of Party                (if Item_Cd = CTL)
25 C    Bal_Num       7  Ballot Number or Letter      (if Item_Cd = PFC)
26 C    Bal_Juris     40  Ballot Measure Jurisdiction  (if Item_Cd = PFC)
27 C    Sup_Opp_Cd    1  Support/Oppose?  Values: S; O (if Item_Cd = PFC)

28 C    Ind_Group     90  Industry Group / Affiliation  (if Item_Cd = SPO)

```

```

R{x}
# C{x} Field Name   Len  Description
-----

```

----- Variable F625/F635 fields follow when Form_Type=[F625|F635] -----

```

03 R    Entity_Cd     3  Values: PTN - Partner
                                OWN - Owner
                                OFF - Officer
                                EMP - Employee

04 R    Enty_NamL     200  Partner, Owner, Officer, Employee Last name
05 R    Enty_NamF      45  Partner, Owner, Officer, Employee First name
06      Enty_NamT      10  Partner, Owner, Officer, Employee Prefix or Title
07      Enty_NamS      10  Partner, Owner, Officer, Employee Suffix
08 C    Enty_Title     45  Title of Entity Named above (Req on F635 only)

```

COVER PAGE - {ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Continued)

=====

R{x}	Field Name	Len	Description	*****
# C{x}	Field Name	Len	Description	* This definition used in Section 4 *
-----	-----	---	-----	*****

----- Variable F601/F602 fields follow when Form_Type=[F601|F602] -----

03	Entity_Cd	3	Null Field not used on Form 601 or 602
04 R	Enty_NamL	200	Lobbyist or Subcontracted Client Last name
05 R	Enty_NamF	45	Lobbyist or Subcontracted Client First name
06	Enty_NamT	10	Lobbyist or Subcontracted Client Prefix or Title
07	Enty_NamS	10	Lobbyist or Subcontracted Client Suffix

----- Variable F603 fields follow when Form_Type=F603 -----

03 Rx	Entity_Cd	3	Values: BUS - Lobbying Firm (Right Col of Part I) EMP - Employee Lobbyist (Left side of Part I) AGY - State Agency (Listed in Part II)
04 R	Enty_NamL	200	Lobbying Entity or State Agency Last name
05 R	Enty_NamF	45	Lobbying Entity First name
06	Enty_NamT	10	Lobbying Entity Prefix or Title
07	Enty_NamS	10	Lobbying Entity Suffix
08 R	Influen_YN	1	Attempt to Influence State Legis? Yes/No

COVER PAGE (PART III; VERIFICATION INFO) RECORD LAYOUT

=====

R{x}	# C{x}	Field Name	Max Len	Description
-----	-----	-----	----	-----
01 Rx		Rec_Type	4	Record Type Value: CVR3
02 Rx		Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F401; F419; F420; F450; F461; F490; F470; {F400; F402; F410; F415; F416 - see Sect. 2}
03 Rx		Entity_Cd	3	Values: TRE - Treasurer CAO - Candidate/Office-holder OFF - Officer (Responsible) PRO - Proponent (OK if F419) SPO - Sponsor (OK if F420)
04 R		Sig_Date	8	Date when signed
05 R		Sig_Loc	45	City and State where signed
06 R		Sig_NamL	200	Treasurer "as signed" Last name
07 R		Sig_NamF	45	Treasurer "as signed" First name
08		Sig_NamT	10	Treasurer "as signed" Prefix or Title
09		Sig_NamS	10	Treasurer "as signed" Suffix

AMENDMENT INFORMATION (aka. Form 405; Part II)

=====

R{x}	# C{x}	Field Name	Len	Description
01 Rx		Rec_Type	4	Record Type Value: F405
02 Rx		Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F419; F420; F490; F450; F461
03 Rx		Exec_Date	8	Date this Amendment executed on
04 Rx		From_Date	8	Report Period From Date of Original Report
05 Rx		Thru_Date	8	Report Period To/Thru Date of Original Report
----- At least one of the Check-boxes below must be "checked"				
06		Cover_CB	1	Cover Page is amended check-box
07		Alloc_CB	1	Allocation Page is amended check-box
08		SumPg_CB	1	Summary Page is amended check-box
09		Sched_CB	1	Schedule(s) are amended check-box
10 Cx		Sched_Lst	40	List of amended Schedule(s) (Req if Sched_CB=X)
11		Parts_CB	1	Part(s) are amended check-box
12 Cx		Parts_Lst	40	List of amended Part(s) (Req if Parts_CB=X)
13 Rx		Amend_Txt1	330	Description of changes. (6 lines of 55 char 9pt text)

CONTRIBUTION INFORMATION (aka. Form 495; Part II)

=====

R{x}	# C{x}	Field Name	Len	Description
01 Rx		Rec_Type	4	Record Type Value: F495
02 Rx		Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F419; F420; F490; F450
03 R		Elect_Date	8	Date of the General Election (same as on CVR rec)
04 Rx		ElectJuris	40	Jurisdiction of the Election
05 Rx		ContribAmt	12	Contribution Amount (6mos prior - 17days before)

SUMMARY TOTALS RECORD LAYOUT

=====

R{x}	#	C{x}	Field Name	Len	Description
01	Rx		Rec_Type	4	Record Type Value: SMRY
02	Rx		Form_Type	8	Name of Filing Form or Schedule Name
03	Rx		Line_Item	8	Line Number of Summary Total
04	R		Amount_A	12	Summary Amount (Column A)
05	C		Amount_B	12	Summary Amount Column B
06	C		Amount_C	12	Summary Amount Column C

Rules:

=====

F419 Candidate Committee uses the following Form_Type and Line Item values

=====

SMRY line	through	SMRY line
SMRY, F419, 1, Amt_A, Amt_B, Amt_C	-->	SMRY, F419, 12, Amt_A, Amt_B, Amt_C
SMRY, F419, 13, Amt_A	-->	SMRY, F419, 20, Amt_A

(Following AP and Schedule SMRY lines are included as applicable)

SMRY, AP, 1, Amt_A	-->	SMRY, AP, 3, Amt_A
SMRY, A, 1, Amt_A	-->	SMRY, A, 3, Amt_A
SMRY, B1, 1, Amt_A	-->	SMRY, B1, 3, Amt_A
SMRY, B2, 4, Amt_A	-->	SMRY, B2, 7, Amt_A
SMRY, B2, d, Amt_A		
SMRY, B3, , Amt_A		
SMRY, C, 1, Amt_A	-->	SMRY, C, 3, Amt_A
SMRY, D, 1, Amt_A	-->	SMRY, D, 7, Amt_A
SMRY, E, 1, Amt_A	-->	SMRY, E, 5, Amt_A
SMRY, F, 1, Amt_A	-->	SMRY, F, 5, Amt_A
SMRY, G, , Amt_A		
SMRY, H1, 1, Amt_A	-->	SMRY, H1, 3, Amt_A
SMRY, H2, 4, Amt_A	-->	SMRY, H2, 7, Amt_A
SMRY, H2, b, Amt_A		
SMRY, H3, , Amt_A		
SMRY, I, 1, Amt_A	-->	SMRY, I, 4, Amt_A

F420 Candidate Committee uses the following Form_Type and Line Item values

=====

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F420,1,Amt_A,Amt_B,Amt_C	-->	SMRY,F420,12,Amt_A,Amt_B,Amt_C
SMRY,F420,13,Amt_A	-->	SMRY,F420,20,Amt_A
SMRY,F420,21,Amt_A,Amt_B		
SMRY,F420,22,Amt_A,Amt_B		

(Following AP and Schedule SMRY lines are included as applicable)

SMRY,AP,1,Amt_A	-->	SMRY,AP,3,Amt_A
SMRY,A,1,Amt_A	-->	SMRY,A,3,Amt_A
SMRY,B1,1,Amt_A	-->	SMRY,B1,3,Amt_A
SMRY,B2,4,Amt_A	-->	SMRY,B2,7,Amt_A
SMRY,B2,d,Amt_A		
SMRY,B3,,Amt_A		
SMRY,C,1,Amt_A	-->	SMRY,C,3,Amt_A
SMRY,D,1,Amt_A	-->	SMRY,D,7,Amt_A
SMRY,E,1,Amt_A	-->	SMRY,E,5,Amt_A
SMRY,F,1,Amt_A	-->	SMRY,F,5,Amt_A
SMRY,G,,Amt_A		
SMRY,H1,1,Amt_A	-->	SMRY,H1,3,Amt_A
SMRY,H2,4,Amt_A	-->	SMRY,H2,7,Amt_A
SMRY,H2,b,Amt_A		
SMRY,H3,,Amt_A		
SMRY,I,1,Amt_A	-->	SMRY,I,4,Amt_A

F490 Candidate Committee uses the following Form_Type and Line Item values

=====

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F490,1,Amt_A,Amt_B,Amt_C	-->	SMRY,F490,12,Amt_A,Amt_B,Amt_C
SMRY,F490,13,Amt_A	-->	SMRY,F490,20,Amt_A
SMRY,F490,21,Amt_A,Amt_B		
SMRY,F490,22,Amt_A,Amt_B		

(Following AP1, AP2 and Schedule SMRY lines are included as applicable)

SMRY,AP1,1,Amt_A	-->	SMRY,AP1,3,Amt_A
SMRY,AP2,1,Amt_A	-->	SMRY,AP2,3,Amt_A
SMRY,A,1,Amt_A	-->	SMRY,A,3,Amt_A
SMRY,B1,1,Amt_A	-->	SMRY,B1,3,Amt_A
SMRY,B2,4,Amt_A	-->	SMRY,B2,7,Amt_A
SMRY,B2,d,Amt_A		
SMRY,B3,,Amt_A		
SMRY,C,1,Amt_A	-->	SMRY,C,3,Amt_A
SMRY,D,1,Amt_A	-->	SMRY,D,7,Amt_A
SMRY,E,1,Amt_A	-->	SMRY,E,5,Amt_A
SMRY,F,1,Amt_A	-->	SMRY,F,5,Amt_A
SMRY,G,,Amt_A		
SMRY,H1,1,Amt_A	-->	SMRY,H1,3,Amt_A
SMRY,H2,4,Amt_A	-->	SMRY,H2,7,Amt_A
SMRY,H2,b,Amt_A		
SMRY,H3,,Amt_A		
SMRY,I,1,Amt_A	-->	SMRY,I,4,Amt_A

F450 Recipient Committee uses the following Form_Type and Line Item values

=====

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F450,1,Amt_A	-->	SMRY,F450,14,Amt_A

F461 Ind. Expend. Cmtte uses the following Form_Type and Line Item values

=====

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F461,1,Amt_A	-->	SMRY,F461,6,Amt_A

F465 Supplemental Ind Expend uses following Form_Type and Line Item values

=====

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F465,1,Amt_A	-->	SMRY,F465,3,Amt_A

F401 Slate Mailer Cmtte uses the following Form_Type and Line Item values

=====

SMRY line	through	SMRY line
=====	=====	=====
SMRY,F401,1,Amt_A,Amt_B	-->	SMRY,F401,2,Amt_A,Amt_B
SMRY,401A,1,Amt_A	-->	SMRY,401A,3,Amt_A
SMRY,401B,1,Amt_A	-->	SMRY,401B,3,Amt_A
SMRY,401B-1,,Amt_A		

RECEIPTS SCHEDULES (A, C, D, I, A-1 and F401A)

=====

R{x}	# C{x}	Field Name	Max Len	Description
----	-----	----	-----	-----
01 Rx		Rec_Type	4	Record Type Value: RCPT
02 Rx		Form_Type	6	Schedule Name/ID Values: A = Sched A / Monetary; C = Sched C / Non-monetary; D = Sched D / Enf. Promise; I = Sched I / Misc. to Cash; A-1 = Sched A-1 / Trans Contribs F401A = Payments Received F497P1 = F497-P1 / Late Contrib Received F497P2 = F497-P2 / Late Contrib Made
03 Rx		Tran_ID	24	Transaction ID - permanent value unique to this item
04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06 R		Entity_Cd	3	Values: (Refer to Entity Code List) RCP - Recipient Committee IND - Individual; OTH - Other (e.g. a Bus, Cmtte, Org, ...)
07 C		Ctrib_NamL	200	Contributor's Last name
08 C		Ctrib_NamF	45	Contributor's First name
09		Ctrib_NamT	10	Contributor's Prefix or Title
10		Ctrib_NamS	10	Contributor's Suffix
11 C		Ctrib_Adr1	45	Address of Contributor
12		Ctrib_Adr2	45	Optional 2nd line of Address
13 C		Ctrib_City	30	City
14 C		Ctrib_ST	2	State code
15 C		Ctrib_ZIP4	10	Zip+4
16 C		Ctrib_Emp	200	Employer (Sched A, C, D - Req if Entity = 'IND')
17 C		Ctrib_Occ	60	Occupation (Sched A, C, D - Req if Entity = 'IND')
18		Ctrib_Self	1	Check Box: Self Employed?
19		Tran_Type	1	Transaction Type - Values: T=Third Party Repayment F=Forgiven Loan R=Returned (Neg. Amt?)
20 R		Rcpt_Date	8	Date item Received (or Begin date of date range)
21		Date_Thru	8	End-date of date range for Items received
22 R		Amount	12	Amount (Monetary/Inkind/Promise) Received A-1 Amount Transferred from Contributor (Sched A-1)
23 C		Aggregate	12	Aggregate YTD Amount (Sched A,C,D,401A)
24 C		Cum_Amt1	12	Cumulative Amount 1 / Prim/Runoff/Spec (Sched A,C,D) A-1 Special Election (Sched A-1)
25 C		Cum_Amt2	12	Cumulative Amount 2 / General (Sched A,C,D) A-1 Special Runoff Election (Sched A-1)
26 C		Prom_Amt	12	Amount Promised (Sched D)
27 C		Ctrib_Dscr	90	Description of Goods/Svcs Rcvd. (Sched C, I)

RECEIPTS SCHEDULES (Continued)

=====

R{x}	#	C{x}	Field Name	Max Len	Description
	28	R	Cmte_ID	7	Committee ID (If 'RCP' & no ID#, Treas info REQ)
	29	C	Tres_NamL	200	Treasurer's Last name (If 'COM' & no ID#, REQ)
	30	C	Tres_NamF	45	Treasurer's First name (If 'COM' & no ID#, REQ)
	31		Tres_NamT	10	Treasurer's Prefix or Title
	32		Tres_NamS	10	Treasurer's Suffix
	33	C	Tres_Adr1	45	Treasurer Address (If 'COM' & no ID#, REQ)
	34		Tres_Adr2	45	" "
	35	C	Tres_City	20	" "
	36	C	Tres_ST	2	" "
	37	C	Tres_ZIP4	10	" "
	38		Intr_NamL	200	Intermediary's Last name
	39		Intr_NamF	45	Intermediary's First name
	40		Intr_NamT	10	Intermediary's Prefix or Title
	41		Intr_NamS	10	Intermediary's Suffix
	42	C	Intr_Adr1	45	Intermediary Addr
	43		Intr_Adr2	45	" "
	44	C	Intr_City	20	" "
	45	C	Intr_ST	2	" "
	46	C	Intr_ZIP4	10	" "
	47	C	Intr_Emp	200	Employer (Sched A, C, D)
	48	C	Intr_Occ	60	Occupation (Sched A, C, D)
	49		Intr_Self	1	Check Box: Self Employed?
	----- Fields 50 - 63 used on F401A -----				
	50	C	Cand_NamL	200	Candidate's Last name
	51	C	Cand_NamF	45	Candidate's First name
	52		Cand_NamT	10	Candidate's Prefix or Title
	53		Cand_NamS	10	Candidate's Suffix
	54	C	Office_Cd	3	Office Sought (See table of code in Overview)
	55	C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
	56	C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
	57	C	Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
	58	C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
	59		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
	60		Bal_Name	200	Ballot Measure Name
	61		Bal_Num	7	Ballot Number or Letter
	62		Bal_Juris	40	Jurisdiction
	63	C	Sup_Opp_Cd	1	Support/Oppose? Values: S; O (F401)
	64		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
	65		Memo_Text	90	Memo Text.

EXPENDITURE SCHEDULES (E, F, G)

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R{x}	# C{x}	Field Name	Max Len	Description
----	----	-----	----	-----
	01 Rx	Rec_Type	4	Record Type Value: EXPN
	02 Rx	Form_Type	6	Schedule Name/ID Values: E = Sched E / Expenditures made F = Sched F / Accrued Expenses G = Sched G / Payments made on Behalf F450P4 = F450 / Part IV Exp & Contrib made; F461P5 = F461 / Part V Exp & Contrib made F465P4 = F465 / Independent Expenditures Made F496 = F496 / Independent Expenditures Made
	03 Rx	Tran_ID	24	Transaction ID - permanent value unique to this item
	04	RptNo_Made	3	Value 0-999 - report when this item created (optional)
	05	RptNo_Void	3	Value 1-999 - report when this item voided (optional)
	06 R	Entity_Cd	3	Values: (Refer to Entity Code List) RCP - Recipient Committee; IND - Individual; OTH - Other
	07 C	Payee_NamL	200	Payee's Last name
	08 C	Payee_NamF	45	Payee's First name
	09	Payee_NamT	10	Payee's Prefix or Title
	10	Payee_NamS	10	Payee's Suffix
	11 C	Payee_Adr1	45	Address of Payee
	12	Payee_Adr2	45	Optional 2nd line of Address
	13 C	Payee_City	30	City
	14 C	Payee_ST	2	State code
	15 C	Payee_ZIP4	10	Zip+4
	16 C	Expn_Date	8	Date of Expenditure (Note: Date not on Sched E,F,G)
	17 R	Amount	12	Amount of Payment (or Accrued Expense)
	18 C	Aggregate	12	Aggregate YTD Amount (Sched P4&P5)
	19 C	Cum_Amt1	12	Cumulative Amount 1 / Prim/Runoff/Spec (Sched P4&P5)
	20 C	Cum_Amt2	12	Cumulative Amount 2 / General (Sched P4&P5)
	21	Expn_ChkNo	8	Check Number
	22 C	Expn_Code	1	Expense Code Values: B,C,F,G,I,L,N,O,P,S,T (Note: I = Independent Expenditure)
	23 C	Expn_Dscr	90	Purpose of Expense and/or Description
	24 R	On-G-YN	1	Itemized on Schedule G? (Yes/No)
	25 C	Agent_NamL	200	Agent or Ind. Contractor's Last name (Sched G)
	26 C	Agent_NamF	45	Agent or Ind. Contractor's First name
	27	Agent_NamT	10	Agent or Ind. Contractor's Prefix or Title
	28	Agent_NamS	10	Agent or Ind. Contractor's Suffix

EXPENSE SCHEDULES (Continued)

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R{x}	#	C{x}	Field Name	Max Len	Description
-----	-----	-----	-----	-----	-----
	29	Rx	Cmte_ID	7	Committee ID (If 'RCP' & no ID#, Treas info REQ)
	30	C	Tres_NamL	200	Treasurer's Last name (If 'COM' & no ID#, REQ)
	31	C	Tres_NamF	45	Treasurer's First name (If 'COM' & no ID#, REQ)
	32		Tres_NamT	10	Treasurer's Prefix or Title
	33		Tres_NamS	10	Treasurer's Suffix
	34	C	Tres_Adr1	45	Treasurer Address (If 'COM' & no ID#, REQ)
	35		Tres_Adr2	45	" "
	36	C	Tres_City	20	" "
	37	C	Tres_ST	2	" "
	38	C	Tres_ZIP4	10	" "
----- Fields 39 - 52 used on P4 & P5 -----					
	39	C	Cand_NamL	200	Candidate's Last name
	40	C	Cand_NamF	45	Candidate's First name
	41		Cand_NamT	10	Candidate's Prefix or Title
	42		Cand_NamS	10	Candidate's Suffix
	43	C	Office_Cd	3	Office Sought (See table of code in Overview)
	44	C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
	45	C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
	46	C	Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
	47	C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
	48		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
	49		Bal_Name	200	Ballot Measure Name
	50		Bal_Num	7	Ballot Number or Letter
	51		Bal_Juris	40	Jurisdiction
	52	C	Sup_Opp_Cd	1	Support/Oppose? Values: S; O (F450, F461)
	53		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
	54		Memo_Text	90	Memo Text.

LOAN SCHEDULES / RECEIVED (B1, B2, B3) & MADE (H1, H2, H3)
 / Form 461; Part VI Loans {Received} Forgiven & Guaranteed
 / Form 461; Part VII Loan {Re-}Payments Received

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R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	4	Record Type Value: LOAN
02 Rx		Form_Type	6	Schedule Name/ID Values: B1 = Sched B Part I / Loans Received; B2 = Sched B Part II / Repayments; B3 = Sched B Part III / Outstand Bal; H1 = Sched H, Part I / Loans Made; H2 = Sched H, Part II / Repayments Rcvd; H3 = Sched H, Part III / Outstand Loan; F461P6 = F461; Part VI / Loan Forgiv/Guran; F461P7 = F461; Part VII / Repayments Rcvd.
03 Rx		Tran_ID	24	Transaction ID - permanent value unique to this item
04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06 C		Loan_TYPE	3	Loan Type: Sched B1 Values: B1L=Lender; B1G=Guarantor Sched B2 Values: B2R=Repay; B2F=Forgiven B2T=Third party payment Sched H2 Values: H2R=Repay; H2F=Forgiven H2T=Third party payment (Not used for Sched B3, H1, and H3)
07 C		Entity_Cd	3	Values: (Refer to Entity Code List) (Req on B1) RCP - Recipient Committee; IND - Individual; OTH - Other
08 R		Lndr_NamL	200	Lender's Last name
09 C		Lndr_NamF	45	Lender's First name (if a person)
10		Lndr_NamT	10	Lender's Prefix or Title
11		Lndr_NamS	10	Lender's Suffix
12 R		Loan_Adr1	45	Address Line 1
13 R		Loan_Adr2	45	Address Line 2
14 R		Loan_City	20	City
15 R		Loan_ST	2	State Code
16 R		Loan_ZIP4	10	ZIP+4

LOAN SCHEDULES / RECEIVED & MADE (Continued)

=====

	R{x}		Max	
#	C{x}	Field Name	Len	Description
----		-----	---	-----

Schedule B; Part I definitions (B1) -----

17	R	Loan_Date1	8	B1 - Date Loan Received (Original Date)
18	R	Loan_Date2	8	B1 - Date Loan Due
19	R	Loan_Amt1	12	B1 - Loan Amount / Guarantor Amount
20		Loan_Amt2	12	B1 - (Not used for Sched B; Part I)
21	C	Loan_Amt3	12	B1 - Year-to-Date
22	C	Loan_Cum1	12	B1 - Cumulative Primary/Special
23	C	Loan_Cum2	12	B1 - Cumulative General
24	R	Loan_Rate	30	B1 - Interest Rate

Schedule B; Part II definitions (B2) -----

17	R	Loan_Date1	8	B2 - Original Date of Loan
18	R	Loan_Date2	8	B2 - Date Repaid/Forgiven (see Loan_TYPE)
19	R	Loan_Amt1	12	B2 - Repaid/Forgiven Amount
20	R	Loan_Amt2	12	B2 - Outstand Principal
21	R	Loan_Amt3	12	B2 - Interest Paid
22		Loan_Cum1	12	N/A (Not used for Sched B; Part II)
23		Loan_Cum2	12	N/A (Not used for Sched B; Part II)
24	C	Loan_Rate	30	B2 - Int Rate (if changed)

Schedule B; Part III definitions (B3) -----

17	R	Loan_Date1	8	B3 - Original Date of Loan
18		Loan_Date2	8	N/A (Not used for Sched B; Part III)
19	R	Loan_Amt1	12	B3 - Original Amt of Loan
20	R	Loan_Amt2	12	B3 - Unpaid Balance
21	R	Loan_Amt3	12	B3 - Unpaid Interest
22		Loan_Cum1	12	N/A (Not used for Sched B; Part III)
23		Loan_Cum2	12	N/A (Not used for Sched B; Part III)
24		Loan_Rate	30	N/A (Not used for Sched B; Part III)

LOAN SCHEDULES / RECEIVED & MADE (Continued)

=====

	R{x}		Max	
#	C{x}	Field Name	Len	Description
----		-----	---	-----

Schedule H; Part I definitions (H1) -----

17	R	Loan_Date1	8	H1 - Date Loan Made (Original Date)
18	R	Loan_Date2	8	H1 - Date Loan Due
19	R	Loan_Amt1	12	H1 - Amount of Loan
20		Loan_Amt2	12	N/A (Not used for Sched H; Part I)
21		Loan_Amt3	12	N/A (Not used for Sched H; Part I)
22		Loan_Cum1	12	N/A (Not used for Sched H; Part I)
23		Loan_Cum2	12	N/A (Not used for Sched H; Part I)
24	R	Loan_Rate	30	H1 - Interest Rate

Schedule H; Part II definitions (H2) -----

17	R	Loan_Date1	8	H2 - Original Date of Loan
18	R	Loan_Date2	8	H2 - Date Repaid/Forgiven (see Loan_TYPE)
19	R	Loan_Amt1	12	H2 - Repaid/Forgiven Amount
20	R	Loan_Amt2	12	H2 - Outstand Principal
21	R	Loan_Amt3	12	H2 - Interest Received
22		Loan_Cum1	12	N/A (Not used for Sched H; Part II)
23		Loan_Cum2	12	N/A (Not used for Sched H; Part II)
24	C	Loan_Rate	30	H2 - Int Rate (if changed)

Schedule H; Part III definitions (H3) -----

17	R	Loan_Date1	8	H3 - Original Date of Loan
18		Loan_Date2	8	N/A (Not used for Sched H; Part III)
19	R	Loan_Amt1	12	H3 - Original Amt of Loan
20	R	Loan_Amt2	12	H3 - Unpaid Principal
21	R	Loan_Amt3	12	H3 - Unpaid Interest
22		Loan_Cum1	12	N/A (Not used for Sched H; Part III)
23		Loan_Cum2	12	N/A (Not used for Sched H; Part III)
24		Loan_Rate	30	N/A (Not used for Sched H; Part III)

LOAN SCHEDULES / RECEIVED & MADE (Continued)

=====

	R{x}		Max	
#	C{x}	Field Name	Len	Description
----		-----	---	-----

Form 461; Part VI definitions (F461P6) -----

17	C	Loan_Date1	8	P6 - Date of Loan (Req if no Forgiven Date)
18	C	Loan_Date2	8	P6 - Date Loan Forgiven (Req if no Loan Date)
19	C	Loan_Amt1	12	P6 - Amount of Loan Forgiven
20	C	Loan_Amt2	12	P6 - Amount of Loan Guaranteed
21	C	Loan_Amt3	12	P6 - Year-to-Date
22	C	Loan_Cum1	12	P6 - Cumulative Primary/Special
23	C	Loan_Cum2	12	P6 - Cumulative General
24		Loan_Rate	30	N/A (Not used for F461; Part VI)

Form 461; Part VII definitions (F461P7) -----

17		Loan_Date1	8	N/A (Not used for F461; Part VI)
18		Loan_Date2	8	P7 - Date Loan Received (not shown on form)
19	R	Loan_Amt1	12	P7 - Repaid Amount
20	R	Loan_Amt2	12	P7 - Unpaid Balance (Principal + Interest)
21		Loan_Amt3	12	N/A (Not used for F461; Part VI)
22		Loan_Cum1	12	N/A (Not used for F461; Part VI)
23		Loan_Cum2	12	N/A (Not used for F461; Part VI)
24		Loan_Rate	30	N/A (Not used for F461; Part VI)

LOAN SCHEDULES / RECEIVED & MADE (Continued)

=====

R{x}	# C{x}	Field Name	Max Len	Description
-----	-----	-----	-----	-----
25	C	Loan_EMP	200	Employer (If Sched B1, Part I)
26	C	Loan_OCC	60	Occupation (If Sched B1, Part I)
27		Loan_Self	1	Check Box: Self Employed?
28		Cmte_ID	7	Committee ID of Lender (If Sched B1)
29	C	Tres_NamL	200	Treasurer's Last name (If B1 & 'COM' & no ID#; REQ)
30	C	Tres_NamF	45	Treasurer's First name (If B1 & 'COM' & no ID#; REQ)
31		Tres_NamT	10	Treasurer's Prefix or Title
32		Tres_NamS	10	Treasurer's Suffix
33	C	Tres_Adr1	45	Treasurer Address (If B1 & 'COM' & no ID#, REQ)
34		Tres_Adr2	45	" "
35	C	Tres_City	20	" "
36	C	Tres_ST	2	" "
37	C	Tres_ZIP4	10	" "
-----	Fields 38 - 62	used on F461P6 & F461P7	-----	-----
38	C	Cand_NamL	200	Candidate's Last name
39	C	Cand_NamF	45	Candidate's First name
40		Cand_NamT	10	Candidate's Prefix or Title
41		Cand_NamS	10	Candidate's Suffix
42	C	Office_Cd	3	Office Sought (See table of code in Overview)
43	C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
44	C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
45	C	Juris_Dscr	30	Off. Juris. Dscrip (Req if Juris_Cd=[CIT CTY LOC OTH])
46	C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
47		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
48		Bal_Name	200	Ballot Measure Name
49		Bal_Num	7	Ballot Number or Letter
50		Bal_Juris	40	Jurisdiction
51		Intr_NamL	200	Intermediary's Last name
52		Intr_NamF	45	Intermediary's First name
53		Intr_NamT	10	Intermediary's Prefix or Title
54		Intr_NamS	10	Intermediary's Suffix
55	C	Intr_Adr1	45	Intermediary Addr
56		Intr_Adr2	45	" "
57	C	Intr_City	20	" "
58	C	Intr_ST	2	" "
59	C	Intr_ZIP4	10	" "
60	C	Intr_Emp	200	Employer (Sched A, C, D)
61	C	Intr_Occ	60	Occupation (Sched A, C, D)
62		Intr_Self	1	Check Box: Self Employed?
63		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
64		Memo_Text	90	Memo Text.

ALLOCATION PAGES / CAMPAIGN & PERSONAL

=====

R{x}	# C{x}	Field Name	Len	Description
		-----	----	-----
01 Rx		Rec_Type	4	Record Type Value: ALOC
02 Rx		Form_Type	3	Schedule Name/ID Values: AP = F419/420 Allocation Page; AP1 = F490 Alloc Page - Part I Candidate AP2 = F490 Alloc Page - Part II Personal
03 Rx		Tran_ID	24	Transaction ID - permanent value unique to this item
04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06		Entity_Cd	3	Values: (Refer to Entity Code List) RCP - Recipient Committee IND - Individual; OTH - Other (e.g. a Bus, Cmtte, Org, ...)
07 R		Alo_NamL	200	Cand Last Name, Cmtte or Measure Name
08 C		Alo_NamF	45	Candidate's First name
09		Alo_NamT	10	Candidate's Prefix or Title
10		Alo_NamS	10	Candidate's Suffix
11 R		Alo_Date	8	Date of Contrib / Ind. Expenditure
12 R		Alo_Amt	12	Contrib/Expenditure
13 R		Alo_YTD	12	Year-to-Date
14 R		Alo_Cum1	12	Cumulative Primary/Special
15 R		Alo_Cum2	12	Cumulative General
16 C		Alo_Dscr	90	Description of Goods/Svcs Allocated
17		Ind_Exp_Cd	1	Independent Expend Check Box
18 R		Sup_Opp_Cd	1	Support/Oppose? Values: S; O
-----	Fields #19 - #26	info requested on F420 Allocation Page -----		
19 C		Office_Cd	3	Office Sought (See table of code in Overview)
20 C		Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
21 C		Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
22 C		Juris_Dscr	30	Off. Juris. Dscrip (Req if Juris_Cd=[CIT CTY LOC OTH])
23 C		Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
24		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
25		Bal_Num	7	Ballot Number or Letter
26		Bal_Juris	40	Jurisdiction
27		Memo_Code	1	Memo Amount? (Date/Amount are informationl only)
28		Memo_Text	90	Memo Text.

Form 401 Payment & Other Disclosure Sched (F401B, F401B-1, F401C, F401D)

R{x}		Max	
# C{x}	Field Name	Len	Description
01 Rx	Rec_Type	4	Record Type Value: S401
02 Rx	Form_Type	6	Schedule Name/ID
			Values: F401B = Payments Made
			F401B-1 = Payments Made in Behalf of
			F401C = Persons Receiving \$1000 +
			F401D = Cand/Measure not on Sched F401A
03 Rx	Tran_ID	24	Transaction ID - permanent value unique to this item
04	RptNo_Made	3	Value 0-999 - report when this item created (optional)
05	RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06 C	Agent_NamL	200	Agent's Last name (401B-1)
07	Agent_NamF	45	Agent's First name
08	Agent_NamT	10	Agent's Prefix or Title
09	Agent_NamS	10	Agent's Suffix
10 C	Payee_NamL	200	Payee's Last name
11	Payee_NamF	45	Payee's First name
12	Payee_NamT	10	Payee's Prefix or Title
13	Payee_NamS	10	Payee's Suffix
14 C	Payee_Adr1	45	Address
15	Payee_Adr2	45	Optional 2nd line of Address
16 C	Payee_City	30	City
17 C	Payee_ST	2	State code
18 C	Payee_ZIP4	10	Zip+4
19 C	Amount	12	Amount (Sched F401B, F401B-1, F401C)
20 C	Aggregate	12	Aggregate YTD Amount (Sched F401C)
21 C	Expn_Dscr	90	Purpose of Expense and/or Description
----- Fields 22 - 35 used on F401D -----			
22 C	Cand_NamL	200	Candidate's Last name
23 C	Cand_NamF	45	Candidate's First name
24	Cand_NamT	10	Candidate's Prefix or Title
25	Cand_NamS	10	Candidate's Suffix
26 C	Office_Cd	3	Office Sought (See table of code in Overview)
27 C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
28 C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide;
			SEN=Senate District; ASM=Assembly District;
			BOE=Board of Equalization District;
			CIT=City; CTY=County; LOC=Local; OTH=Other
29 C	Juris_Dscr	30	Off. Juris. Dscrip (Req if Juris_Cd=[CIT CTY LOC OTH])
30 C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
31	Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
32	Bal_Name	200	Ballot Measure Name
33	Bal_Num	7	Ballot Number or Letter
34	Bal_Juris	40	Jurisdiction
35 C	Sup_Opp_Cd	1	Support/Oppose? Values: S; O (F401)
36	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
37	Memo_Text	90	Memo Text.

Form 496 Late Independent Expenditures Made

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
----	-----	-----	---	-----
01	Rx	Rec_Type	4	Record Type Value: S496
02	Rx	Form_Type	6	Schedule Name/ID Value: F496 = Independent Expenditures Made
03	Rx	Tran_ID	24	Transaction ID - permanent value unique to this item
04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06	C	Amount	12	Amount (Sched F401B, F401B-1, F401C)
07	C	Aggregate	12	Aggregate YTD Amount (Sched F401C)
08	C	Expn_Dscr	90	Purpose of Expense and/or Description
09		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
10		Memo_Text	90	Memo Text.

Form 497 Late Contributions Received/Made

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R{x}	#	C{x}	Field Name	Max Len	Description
----	----	----	-----	----	-----
	01	Rx	Rec_Type	4	Record Type Value: S497
	02	Rx	Form_Type	6	Schedule Name/ID Value: F497P1 = Late Contribution Received Value: F497P2 = Late Contribution Made
	03	Rx	Tran_ID	24	Transaction ID - permanent value unique to this item
	04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
	05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
	06	R	Entity_Cd	3	Values: (Refer to Entity Code List) CAO - Candidate/Office-holder RCP - Recipient Committee IND - Individual; OTH - Other (e.g. a Bus, Cmtte, Org, ...)
	07	C	Ctrib_NamL	200	Contributor's Last name
	08	C	Ctrib_NamF	45	Contributor's First name
	09		Ctrib_NamT	10	Contributor's Prefix or Title
	10		Ctrib_NamS	10	Contributor's Suffix
	11	C	Ctrib_Adr1	45	Address of Contributor
	12		Ctrib_Adr2	45	Optional 2nd line of Address
	13	C	Ctrib_City	30	City
	14	C	Ctrib_ST	2	State code
	15	C	Ctrib_ZIP4	10	Zip+4
	16	C	Ctrib_Emp	200	Employer (Sched A, C, D - Req if Entity = 'IND')
	17	C	Ctrib_Occ	60	Occupation (Sched A, C, D - Req if Entity = 'IND')
	18		Ctrib_Self	1	Check Box: Self Employed?
	19	C	Elec_Date	8	Date of Election (Req if P2)
	20	R	Ctrib_Date	8	Date item Received/Made (Begin date of date range for Items received)
	21		Date_Thru	8	End-date of date range for Items received
	22	R	Amount	12	Amount Received/Made
	23	C	Cmte_ID	7	Committee ID (Req if Entity_Cd=[CAN RCP]... (Absolutely Req on F497P2 when ... [CAN RCP].)

Form 497 Late Contributions Received/Made (Continued)

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R{x}	#	C{x}	Field Name	Len	Description
	24	C	Office_Cd	3	Office Sought (See table of code in Overview)
	25	C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
	26	C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
	27	C	Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
	28	C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
	29		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought
	30		Bal_Name	200	Ballot Measure Name
	31		Bal_Num	7	Ballot Number or Letter
	32		Bal_Juris	40	Jurisdiction
	33		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
	34		Memo_Text	90	Memo Text.

 Section 2 - Campaign Statements

400 Statement of Organization (Slate Mailer Organization)
 402 Statement of Termination (Slate Mailer Organization)
 410 Statement of Organization Recipient Committee
 415 Recipient Committee Statement of Termination
 416 Officeholder and Candidate Statement of Termination

Electronic File Components by Filing Type

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RecType	FormName	Description
-----	-----	-----
HDR	CAL	"CAL" Header record
CVR	F400	Cover Page; Stmt of Organization / Slate Mailer Org
CVR2	F400	Cover Page; Additional Names & Addresses
CVR3	F400	Cover Page; Part III; Verification info
HDR	CAL	"CAL" Header record
CVR	F402	Cover Page; Stmt of Termination / Slate Mailer Org
CVR3	F402	Cover Page; Part III; Verification info
HDR	CAL	"CAL" Header record
CVR	F410	Cover Page; Stmt of Organization / Recipient Committee
CVR2	F410	Cover Page; Additional Names & Addresses
CVR3	F410	Cover Page; Part III; Verification info
HDR	CAL	"CAL" Header record
CVR	F415	Cover Page; Stmt of Termination / Recipient Committee
CVR3	F415	Cover Page; Part III; Verification info
HDR	CAL	"CAL" Header record
CVR	F416	Cover Page; Stmt of Termination / Officeholder & Cand.
CVR3	F416	Cover Page; Part III; Verification info

COVER PAGE RECORD LAYOUT FOR F400, F410 (STATEMENT OF ORGANIZATION)
 F402, F415, F416 (STMT OF TERMINATION)

=====					
R{x}	Field Name	Max			
# C{x}	Field Name	Len	Description		
----	-----	---	-----		
01 Rx	Rec_Type	3	Record Type Value: CVR		
02 Rx	Form_Type	4	Type of Filing or Form set. Values: F400; F402; F410; F415; F416		
03 Rx	Filer_ID	7	Committee ID number of Filer		
04 R	Entity_Cd	3	Values: SMO - Slate Mailer Organization (F400,402) RCP - Recipient Committee (F410,415) CAO - Candidate/Office-holder (F416)		
05 Rx	Filer_NamL	200	Cand. Last name or Cmtte/Org Name		
06 C	Filer_NamF	45	Candidate's First name		
07	Filer_NamT	10	Candidate's Prefix or Title		
08	Filer_NamS	10	Candidate's Suffix		
09 Rx	Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999		
10 Rx	Rpt_Date	8	Date this report is filed		
11 C	Qual_CB	1	Qualified Committee check-box (Req if SMO)		
12 C	Qualfy_Dt	8	Date Qualified as committee (Req if Qual_CB=X)		
13 C	Term_Date	8	Termination Effective Date (Req if F402,415,416)		
14 R	Adr1	45	Address of Filing Org/Committee/Candidate/Officeholder		
15	Adr2	45	" " " " " "		
16 R	City	30	" " " " " "		
17 R	ST	2	" " " " " "		
18 R	ZIP4	10	" " " " " "		
19 R	Phone	20			
20 R	County_Res	20	County of Domicile, Residence, or where Located		
21	County_Act	20	County where Active (F410)		
22	Mail_Adr1	45	Mailing Address of Filing Committee		
23	Mail_Adr2	45	" " " " "		
24 C	Mail_City	30	" " " " "		
25 C	Mail_ST	2	" " " " "		
26 C	Mail_ZIP4	10	" " " " "		
27	Cmte_FAX	20	Optional Committee FAX number		
28	Cmte_Email	60	Optional Committee Email address		

COVER PAGE LAYOUT FOR STATEMENT OF ORGANIZATION/TERMINATION (Continued)

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R{x}	#	C{x}	Field Name	Max Len	Description
	29	R	Tres_NamL	200	Treasurer's Last name
	30	R	Tres_NamF	45	Treasurer's First name
	31		Tres_NamT	10	Treasurer's Prefix or Title
	32		Tres_NamS	10	Treasurer's Suffix
	33	R	Tres_Adr1	45	Treasurer Address
	34		Tres_Adr2	45	" "
	35	R	Tres_City	20	" "
	36	R	Tres_ST	2	" "
	37	R	Tres_ZIP4	10	" "
	38	R	Tres_Phon	20	" "

----- Fields 39 - 48 used on [F400|F410] Statements of Organization -----

39	C	Com82013YN	1	Is this SMO a 82013 "Committee"? (Yes/No) (F400)
40	C	Com82013Nm	200	Name of 82013 Committee (F400; when Com82013YN=Y)
41		Com82013ID	7	ID of 82013 Committee (if Com82013Nm is a RCP cmtte)
42	C	Actvty_Lvl	2	Main level of Activity Values: CI - City CO - County (Req if SMO or GenPurp_CB=X) ST - State
43		Control_CB	1	Controlled Committee Check-box (F410)
44		SurplusDsp	90	Disposition of Surplus Funds (F410)
45		PrimFC_CB	1	Primarily Formed Committee Check-box (F410)
46		GenPurp_CB	1	General Purpose Committee Check-box (F410)
47		GPC_Descr	90	Brief description of Activity of GPC (F410)
48		Sponsor_CB	1	Sponsored Committee Check-box (F410)

----- Fields 39 - 44 used on F416 Officeholder/Candidate Termination -----

39	C	Office_Cd	3	Office Sought (See table of code in Overview)
40	C	Offic_Dscr	30	Office Sought Description (Req if Office_Cd=OTH)
41	C	Juris_Cd	3	Office Jurisdiction Code Values: STW=Statewide; SEN=Senate District; ASM=Assembly District; BOE=Board of Equalization District; CIT=City; CTY=County; LOC=Local; OTH=Other
42	C	Juris_Dscr	30	Office Jurisdiction Descrip (Req if Juris_Cd=[CIT CTY LOC OTH])
43	C	Dist_No	3	Office District Number (Req if Juris_Cd=[SEN ASM BOE])
44		Off_S_H_Cd	1	Office Sought/Held Code: H=Held; S=Sought

COVER PAGE (PART II; ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
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01	Rx	Rec_Type	4	Record Type Value: CVR2
02	Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F400; F410

Note: Remainder of CVR record is parsed depending on value of Form_Type.

Refer to Section I description of the CVR2 record for the description of field parsing rules for Campaign Statements F400 & F410.

COVER PAGE (PART III; VERIFICATION INFO) RECORD LAYOUT

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R{x}		Max	
#	C{x} Field Name	Len	Description
-----		---	-----
01 Rx	Rec_Type	4	Record Type Value: CVR3
02 Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F400; F402; F410; F415; F416

Note: Remainder of CVR record is parsed depending on value of Form_Type.

Refer to Section I description of the CVR3 record for the description of field parsing rules for Campaign Statements F400, F402, F410, F415 & F416.

 Section 3 - Lobbyist Disclosure Reports

615 Lobbyist Report
 625 Report of Lobbying Firm
 630* Payments Made to Lobbying Coalitions (Attachment to Form 625 or 635)
 635 Report of Lobbyist Employer or Report of Lobbying Coalition
 635-C* Payments Received by Lobbying Coalitions
 640* Governmental Agencies Reporting (Attachment to Form 635 or Form 645)
 645 Report of Person Spending \$5,000 or More
 690* Amendment to Lobbying Disclosure Report

* The 630, 635-C, 640, and 690 forms are not filed standalone.
 but instead included within the 615, 625, 635, and 645 filings.

Electronic File Components by Filing Type

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RecType	FormName	Description
-----	-----	-----
HDR	CAL	"CAL" Header record
CVR	F615	Cover Page; Lobbyist Report
F690	F615	Amendment Information sheet (aka Form 690)
SMRY	F615...	Summary Page & Misc. Schedule Line-item [sub]totals
LEXP	F615P1	Part I - Activity Expenses
LCCM	F615P2	Part II - Campaign Contributions Made [or Delivered]
HDR	CAL	"CAL" Header record
CVR	F625	Cover Page; Recipient Committee
CVR2	F625	Cover Page; Part II; Partners, Owners, Officers, ...
F690	F625	Amendment Information sheet (aka Form 690)
SMRY	F625...	Summary Page & Misc. Schedule Line-item [sub]totals
LPAY	F625P2	Payments Received in Connection with Lobbying Activity
LEXP	F625P3A	Part III/Sec A - Activity Expenses
LOTH	F625P3B	Part III/Sec B - Payments to OTHER Lobbying Firms
LCCM	F625P4B	Part IV/Sec B - Campaign Contributions Made
LATT	S630	Attachment Form 630 - Payments Made to Lobbying Coalitions

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F635	Cover Page; Candidate Committee
CVR2	F635	Cover Page; Part II; Partners, Owners, Officers, ...
F690	F635	Amendment Information sheet (aka Form 690)
SMRY	F635...	Summary Page & Misc. Schedule Line-item [sub]totals
LPAY	F635P3B	Part III/Sec B - Payments to Lobbying Firms
LEXP	F635P3C	Part III/Sec C - Activity Expenses
LCCM	F635P4B	Part IV/SecB - Campaign Contributions Made
LATT	S630	Attach Form 630 - Payments Made to Lobbying Coalitions
LATT	S635-C	Attach Form 635-C - Payments Rcvd by Lobbying Coalitions
LATT	S640	Attach Form 640 - Other Payments to Influence ...
HDR	CAL	"CAL" Header record
CVR	F645	Cover Page; Recipient Committee
F690	F645	Amendment Information sheet (aka Form 690)
SMRY	F645...	Summary Page & Misc. Schedule Line-item [sub]totals
LEXP	F645P2A	Part II/Sec A - Activity Expenses
LCCM	F645P3B	Part III/SecB - Campaign Contributions Made
LATT	S640	Attach Form 640 - Other Payments to Influence ...

COVER PAGE RECORD LAYOUT FOR F615,625,635,645 LOBBYIST DISCLOSURE REPORTS

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  R{x}
# C{x} Field Name   Len  Description
-----
01 Rx  Rec_Type      3  Record Type Value: CVR
02 Rx  Form_Type     4  Type of Filing or Form set.
                        Values:  F615; F625; F635; F645
03 Rx  Filer_ID      7  Committee ID number of Filer

04      Entity_Cd     3  Values: LBY - Lobbyist Name (F615)
05 Rx  Filer_NamL    200 Name of Lobbyist Filing Report
06 C   Filer_NamF     45  Lobbyist's First name
07      Filer_NamT    10  Lobbyist's Prefix or Title
08      Filer_NamS    10  Lobbyist's Suffix

09 Rx  Report_Num     3  Report Number - Values: 000      - Original Report
                        001-999 - Amended Rpt #1-#999

10 Rx  Rpt_Date       8  Date this report is filed

11 R   From_Date      8  Reporting Period From Date
12 R   Thru_Date      8  Reporting Period To/Thru Date
13      Cum_Beg_Dt     8  Cumulative Period Beginning Date

14 R   Firm_Name      200 Name of Firm/Employer/Coalition
15 R   Firm_Adr1      45  Address of Firm/Employer/Coalition
16      Firm_Adr2      45  "      "      "      "      "
17 R   Firm_City      30  "      "      "      "      "
18 R   Firm_ST        2   "      "      "      "      "
19 R   Firm_ZIP4      10  "      "      "      "      "
20 R   Firm_Phon      20

21      Mail_Adr1      45  Mailing Address of Firm/Employer/Coalition
22      Mail_Adr2      45  "      "      "      "      "
23 C   Mail_City      30  "      "      "      "      "
24 C   Mail_ST        2   "      "      "      "      "
25 C   Mail_ZIP4      10  "      "      "      "      "
26      Mail_Phon      20

27 R   Sig_Date       8  Date when signed
28 R   Sig_Loc        45  City and State where signed
29 R   Sig_NamL      200  Signer "as signed" Last name
30 R   Sig_NamF      45  Signer "as signed" First name
31      Sig_NamT      10  Signer "as signed" Prefix or Title
32      Sig_NamS      10  Signer "as signed" Suffix

33 R   Prn_NamL      200  Signer "as typed/printed" Last name (F625,F635 only)
34 R   Prn_NamF      45  Signer "as typed/printed" First name (F625,F635 only)
35      Prn_NamT      10  Signer "as typed/printed" Prefix or Title
36      Prn_NamS      10  Signer "as typed/printed" Suffix

37 C   Sig_Title      40  Title of Signer                                (F625,F635 only)

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COVER PAGE RECORD LAYOUT FOR F615,625,635,645 (Continued)

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R{x}	Field Name	Max Len	Description
# C{x}			

----- Variable F615 fields follow when Form_Type=F615 -----

38	NoPart1_CB	1	"No Part I information" check-box
39	NoPart2_CB	1	"No Part II information" check-box

----- Variable F625 fields follow when Form_Type=F625 -----

38	Part1_1_CB	1	"Partners, Owners, ... Form 615 attached" check-box
39	Part1_2_CB	1	"Partners, Owners, ... Listed below" check-box
40	Ctrib_N_CB	1	"Campaign Contributions? - None" check-box
41	Ctrib_Y_CB	1	"Campaign Contributions? - P4 attached" check-box
42	Lobby_N_CB	1	"Lobby Coalition - None" check-box
43	Lobby_Y_CB	1	"Lobby Coalition - F630 attached" check-box
44	Major_NamL	200	Major Donor Last Name (Part IV; Section A)
45	Major_NamF	45	Major Donor First Name(s)
46	Major_NamT	10	Major Donor Prefix or Title
47	Major_NamS	10	Major Donor Suffix
48	RcpCmte_Nm	200	Recipient Committee Name (Part IV; Section A)
49	RcpCmte_ID	7	Recipient Committee ID # (Part IV; Section A)

----- Variable F635 fields follow when Form_Type=F635 -----

38	Ctrib_N_CB	1	"Campaign Contributions? - None" check-box
39	Ctrib_Y_CB	1	"Campaign Contributions? - P4 attached" check-box
40 R	Lby_Actvty	400	Description of Lobbying Activity
41	Major_NamL	200	Major Donor Last Name (Part IV; Section A)
42	Major_NamF	45	Major Donor First Name(s)
43	Major_NamT	10	Major Donor Prefix or Title
44	Major_NamS	10	Major Donor Suffix
45	RcpCmte_Nm	200	Recipient Committee Name (Part IV; Section A)
46	RcpCmte_ID	7	Recipient Committee ID # (Part IV; Section A)

COVER PAGE RECORD LAYOUT FOR F615,625,635,645 (Continued)

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
----		-----	---	-----

----- Variable F645 fields follow when Form_Type=F645 -----

38		Ctrib_N_CB	1	"Campaign Contributions? - None" check-box
39		Ctrib_Y_CB	1	"Campaign Contributions? - P3 attached" check-box
40	R	Lby_Actvty	400	Description of Lobbying Activity
41		Major_NamL	200	Major Donor Last Name (Part III; Section A)
42		Major_NamF	45	Major Donor First Name(s)
43		Major_NamT	10	Major Donor Prefix or Title
44		Major_NamS	10	Major Donor Suffix
45		RcpCmte_Nm	200	Recipient Committee Name (Part III; Section A)
46		RcpCmte_ID	7	Recipient Committee ID # (Part III; Section A)

COVER PAGE (PART II; ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT

=====

R{x}		Max	
#	C{x}	Field Name	Description
-----		Len	-----
01	Rx	Rec_Type	4 Record Type Value: CVR2
02	Rx	Form_Type	4 Form_Type (must equal Form_Type in CVR record) Values: F625; F635

Note: Remainder of CVR record is parsed depending on value of Form_Type.

Refer to Section I description of the CVR2 record for the description of field parsing rules for Lobbyist Disclosure Filings F625 & F635.

AMENDMENT INFORMATION (aka. Form 690; Part II)

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	R{x}		Max	
#	C{x}	Field Name	Len	Description
----	-----	----	----	-----
01	Rx	Rec_Type	4	Record Type Value: F690
02	Rx	Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F615; F625; F635; F645
03	Rx	Exec_Date	8	Date the original report (or prior amendment to the original report) was executed on
04	Rx	From_Date	8	Report Period From Date of Original Report
05	Rx	Thru_Date	8	Report Period To/Thru Date of Original Report
06	Rx	Chg_Parts	100	Amended info affects items on Part(s)
07	Rx	Chg_Sects	100	Amended info affects items on Section(s)
08	Rx	Amend_Txt1	330	Description of changes (6 lines of 55 char 9pt text)

SUMMARY TOTALS RECORD LAYOUT

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R{x}			Max	
#	C{x}	Field Name	Len	Description
----	-----	-----	---	-----
01	Rx	Rec_Type	4	Record Type Value: SMRY
02	Rx	Form_Type	8	Name of Filing Form or Schedule Name
03	Rx	Line_Item	8	Line Number of Summary Total
04	R	Amount_A	12	Summary Amount (Amount this Period)

Rules:

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F615 Lobbyist Report does not have SMRY totals

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F625 Lobbying Firm Report uses the following Form_Type and Line Item values

=====

SMRY line

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SMRY,F625,A,Amt_A

SMRY,F625,B,Amt_A

SMRY,F625,C,Amt_A

SMRY,F625,D,Amt_A

(Following Schedule SMRY lines are included as applicable)

SMRY,F625P2,,Amt_A

SMRY,F625P3A,1,Amt_A

SMRY,F625P3A,2,Amt_A

SMRY,F625P3A,3,Amt_A

SMRY,F625P3B,,Amt_A

F635 Lobbying EMPLOYER/COALITION uses these Form_Type and Line Item values

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SMRY line

=====

SMRY,F635,A,Amt_A
SMRY,F635,B,Amt_A
SMRY,F635,C,Amt_A
SMRY,F635,D,Amt_A
SMRY,F635,ABCD,Amt_A
SMRY,F635,E,Amt_A

(Following Schedule SMRY lines are included as applicable)

SMRY,F635P3A,1,Amt_A
SMRY,F635P3A,2,Amt_A
SMRY,F635P3B,,Amt_A
SMRY,F635P3C,,Amt_A
SMRY,F635P3D,1,Amt_A
SMRY,F635P3D,2,Amt_A
SMRY,F635P3D,3,Amt_A
SMRY,F635P3E,,Amt_A

SMRY,S640,1,Amt_A
SMRY,S640,2,Amt_A
SMRY,S640,3,Amt_A
SMRY,S640,4,Amt_A
SMRY,S640,5,Amt_A
SMRY,S640,TOT,Amt_A

F645 Person Spending over \$5000 uses these Form_Type and Line Item values

=====

SMRY line

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SMRY,F645,A,Amt_A
SMRY,F645,B,Amt_A
SMRY,F645,AB,Amt_A
SMRY,F645,C,Amt_A

(Following Schedule SMRY lines are included as applicable)

SMRY,F645P2A,,Amt_A
SMRY,F645P2B,1,Amt_A
SMRY,F645P2B,2,Amt_A
SMRY,F645P2B,3,Amt_A
SMRY,F645P2C,,Amt_A

SMRY,S640,1,Amt_A
SMRY,S640,2,Amt_A
SMRY,S640,3,Amt_A
SMRY,S640,4,Amt_A
SMRY,S640,5,Amt_A
SMRY,S640,TOT,Amt_A

ACTIVITY EXPENDITURE SCHEDULES: (F615P1; F625P3A; F635P3C; F645P2A)

=====

R{x}	# C{x}	Field Name	Max Len	Description
----	----	-----	----	-----
	01 Rx	Rec_Type	4	Record Type Value: LEXP
	02 Rx	Form_Type	6	Schedule Name/ID Values: F615P1 = F615/Part 1 - Activity Expenses F625P3A = F625/Part 3A - Activity Expenses F625P3B = F625/Part 3B - Payments to Lobbying Firms F635P3C = F635/Part 3C - Activity Expenses F645P2A = F645/Part 2A - Activity Expenses
	03 Rx	Tran_ID	24	Transaction ID - permanent value unique to this item
	04	RptNo_Made	3	Value 0-999 - report when this item created (optional)
	05	RptNo_Void	3	Value 1-999 - report when this item voided (optional)
	06 R	RecSubType	1	1 = Main Item Entry (Date and Amount are required) 2 = Subsequent detail of additional Beneficiary info
	07 R	Entity_Cd	3	Values: (Refer to Entity Code List) RCP - Recipient Committee; IND - Individual; OTH - Other
	08 R	Payee_NamL	200	Payee's Last name
	09 C	Payee_NamF	45	Payee's First name
	10	Payee_NamT	10	Payee's Prefix or Title
	11	Payee_NamS	10	Payee's Suffix
	12 R	Payee_Adr1	45	Address of Payee
	13	Payee_Adr2	45	Optional 2nd line of Address
	14 R	Payee_City	30	City
	15 R	Payee_ST	2	State code
	16 R	Payee_ZIP4	10	Zip+4
	17	CredCardCo	200	Name of Credit Card Company (if paid by Credit Card)
	18 R	Bene_Name	90	Name of Reportable Person Benefiting
	19 R	Bene_Posit	90	Official Position of Person Benefiting
	20 R	Bene_Amt	12	Amount Benefiting Beneficiary
	21 R	Expn_Dscr	90	Description of Consideration
	22 C	Date	8	Date of Expenditure (Only when RecSubType=1)
	23 C	Amount	12	Amount of Payment (Only when RecSubType=1)
	24	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
	25	Memo_Text	90	Memo Text.

PAYMENTS MADE/RECEIVED TO/FROM LOBBYING FIRMS SCHEDULES: (F625P2; F635P3B)

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  R{x}
# C{x} Field Name   Max
-----
01 Rx  Rec_Type     4  Record Type Value: LPAY

02 Rx  Form_Type     5  Schedule Name/ID  Value:
                        F625P2 = F625/Part 2 - Paymts Rcvd for Lobby Activity
                        F635P3B = F635/Part 3B - Payments to Lobbying Firms

03 Rx  Tran_ID      24  Transaction ID - permanent value unique to this item
04      RptNo_Made    3  Value 0-999 - report when this item created (optional)
05      RptNo_Void    3  Value 1-999 - report when this item voided (optional)

06 R   Entity_Cd     3  Values: (Refer to Entity Code List)
                        RCP - Recipient Committee
                        IND - Individual;
                        OTH - Other (e.g. a Bus, Cmtte, Org, ...)

07 R   Emplr_NamL    200  Employer's Last name
08 C   Emplr_NamF     45  Employer's First name
09      Emplr_NamT    10  Employer's Prefix or Title
10      Emplr_NamS    10  Employer's Suffix
11 R   Emplr_Adr1     45  Address of Employer
12      Emplr_Adr2     45  Optional 2nd line of Address
13 R   Emplr_City     30  City
14 R   Emplr_ST        2  State code
15 R   Emplr_ZIP4     10  Zip+4
16 R   Emplr_Phon     20  Phone Number

17 R   Lby_Actvty    200  Description of Lobbying Activity

18 R   Fees_Amt       12  Fees and Retainers Amount
19 R   Reimb_Amt       12  Reimbursements of Expenses Amount
20 R   Advan_Amt       12  Advance & Other Payments Amount
21 R   Advan_Dscr     100  Description of Advance and Other Payments
22 R   Per_Total       12  Total this {reporting} Period
23 R   Cum_Total       12  Cumulative Total to Date

24      Memo_Code       1  Memo Amount?  (Date/Amount are informationl only)
25      Memo_Text       90  Memo Text.

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PAYMENT TO OTHER LOBBYING FIRMS: (F625P3B)

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R{x}	# C{x}	Field Name	Max Len	Description
----	-----	-----	----	-----
	01 Rx	Rec_Type	4	Record Type Value: LOTH
	02 Rx	Form_Type	6	Schedule Name/ID Values: F625P3B = F625/Part 3B - Paymts to OTHER Lobby Firms
	03 Rx	Tran_ID	24	Transaction ID - permanent value unique to this item
	04	RptNo_Made	3	Value 0-999 - report when this item created (optional)
	05	RptNo_Void	3	Value 1-999 - report when this item voided (optional)
	06 R	Firm_Name	200	Name of Firm
	07 R	Firm_Adr1	45	Address of Firm
	08	Firm_Adr2	45	Optional 2nd line of Address
	09 R	Firm_City	30	City
	10 R	Firm_ST	2	State code
	11 R	Firm_ZIP4	10	Zip+4
	12 R	Firm_Phon	20	Phone Number
	13 R	Subj_NamL	200	Last Name of Employer/Client subject of lobbying
	14 R	Subj_NamF	45	First Name of Employer/Client subject of lobbying
	15 R	Subj_NamT	45	Prefix/Title of Employer/Client subject of lobbying
	16 R	Subj_NamS	45	Suffix of Employer/Client subject of lobbying
	17	Date	8	Date of Payment (Does not show on form)
	18 R	Amount	12	Amount of Payment
	19 R	Cum_Amt	12	Cumulative Total to Date
	20	Memo_Code	1	Memo Amount? (Date/Amount are informational only)
	21	Memo_Text	90	Memo Text.

CAMPAIGN CONTRIBUTIONS SCHEDULES: (F615P2; F625P4B; F635P4B; F645P3B)

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R{x}	# C{x}	Field Name	Max Len	Description
----	----	-----	----	-----
01 Rx		Rec_Type	4	Record Type Value: LCCM
02 Rx		Form_Type	6	Schedule Name/ID Values: F615P2 = F615/Part 2 - Camp Contrib F625P4B = F625/Part 4B - Camp Contrib F635P4B = F635/Part 4B - Camp Contrib F645P3B = F645/Part 3B - Camp Contrib
03 Rx		Tran_ID	24	Transaction ID - permanent value unique to this item
04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06 R		Entity_Cd	3	Values: (Refer to Entity Code List) RCP - Recipient Committee; IND - Individual; OTH - Other
07 R		Recip_NamL	200	Name of Recipient
08 C		Recip_NamF	45	Recipient's First name
09		Recip_NamT	10	Recipient's Prefix or Title
10		Recip_NamS	10	Recipient's Suffix
11 R		Recip_Adr1	45	Address of Recipient
12		Recip_Adr2	45	Optional 2nd line of Address
13 R		Recip_City	30	City
14 R		Recip_ST	2	State code
15 R		Recip_ZIP4	10	Zip+4
16 C		Recip_ID	7	ID # of Recipient (If Entity_Cd=RCP)
17 C		Ctrib_NamL	200	Contributor's Last name (If other than Lobbyist)
18 C		Ctrib_NamF	45	Contributor's First name
19		Ctrib_NamT	10	Contributor's Prefix or Title
20		Ctrib_NamS	10	Contributor's Suffix
21 R		Acct_Name	90	Name of Separate Account (If applicable)
22 C		Date	8	Date of Contribution
23 C		Amount	12	Amount of Contribution
24		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
25		Memo_Text	90	Memo Text.

ATTACHMENT SCHEDULES FOR PAYMENTS: (S630; S635-C; S640)

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R{x}	# C{x}	Field Name	Len	Description
01 Rx		Rec_Type	4	Record Type Value: LATT
02 Rx		Form_Type	6	Schedule Name/ID Values: S630 = Payments Made to Lobbying Coalitions S635-C = Payments Rcvd by Lobbying Coalitions S640 = Other Payments to Influence ...
03 Rx		Tran_ID	24	Transaction ID - permanent value unique to this item
04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06 R		Entity_Cd	3	Values: (Refer to Entity Code List) RCP - Recipient Committee; IND - Individual; OTH - Other
07 R		Recip_NamL	200	Recipient's Last name
08 C		Recip_NamF	45	Recipient's First name
09		Recip_NamT	10	Recipient's Prefix or Title
10		Recip_NamS	10	Recipient's Suffix
11 R		Recip_Adr1	45	Address of Recipient
12		Recip_Adr2	45	Optional 2nd line of Address
13 R		Recip_City	30	City
14 R		Recip_ST	2	State code
15 R		Recip_ZIP4	10	Zip+4
16		Date	8	Date of Payment (Does not show on form)
17 R		Amount	12	Amount of Payment
18 R		Cum_Amt	12	Cumulative Total to Date
19 R		CumBeg_Dt	8	Cumulative Period Beginning Date
20		Memo_Code	1	Memo Amount? (Date/Amount are informational only)
21		Memo_Text	90	Memo Text.

 Section 4 - Lobbyist Statements

601 Lobbying Firm Registration Statement
 602 Lobbying Firm Activity Authorization
 603 Lobbyist Employer or Lobbying Coalition Registration Statement
 604* Lobbyist Certification Statement
 605* Amendment to Registration, Lobbying Firm, Lobbyist Employer,
 Lobbying Coalition
 606* Notice of Termination
 607 Notice of Withdrawal

* The 604, 605, and 606 forms are not filed as stand-alone filings,
 but instead included within the 601, 602, and 603 filings.

Electronic File Components by Filing Type
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RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F601	Cover Page; Lobbying Firm Registration Statement
CVR2	F601	Cover Page; Part I Individual Lobbyists
F604	F601	Lobbyist Cert Statement (also filed as Stand-alone?)
F605	F601	Amendment Information sheet (aka Form 605)
F606	F603	Notice of Termination (also filed as a Stand-alone?)
LEMP	F601P2A	Part II/Sec A - Lobbyist Employers
LEMP	F601P2B	Part II/Sec B - Subcontracted Clients
HDR	CAL	"CAL" Header record
CVR	F602	Cover Page; Lobbying Firm Activity Authorization
CVR2	F602	Cover Page; Names of Subcontracted Clients
HDR	CAL	"CAL" Header record
CVR	F603	Cover Page; Lobbyist Employer/Coalition Regis Stmt
CVR2	F603	Cover Page; Names of Employees, Firms & Agencies
F604	F601	Lobbyist Cert Statement (also filed as Stand-alone?)
F605	F603	Amendment Information sheet (aka Form 605)
F606	F603	Notice of Termination (also filed as a Stand-alone?)

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F604	Cover Page; Lobbyist Certification Statement
HDR	CAL	"CAL" Header record
CVR	F606	Cover Page; Notice of Termination
HDR	CAL	"CAL" Header record
CVR	F607	Cover Page; Notice of Withdrawal

COVER PAGE RECORD LAYOUT FOR: F601; F602; F603; F604; F606; F607

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R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	4	Record Type Value: CVR; {F604; F606 if embedded within F601; F603}
02 Rx		Form_Type	4	Type of Filing or Form set. Values: F601; F602; F603; F604; F606; F607
03 Rx		Filer_ID	7	Committee ID number of Filer
04		Entity_Cd	3	Values: BUS - Business / Lobbying Firm (F601)
05 Rx		Filer_NamL	200	Lobbying Firm Name (or Lobbyist Last Name on F604)
06 C		Filer_NamF	45	Lobbyist's First name
07		Filer_NamT	10	Lobbyist's Prefix or Title
08		Filer_NamS	10	Lobbyist's Suffix
09 Rx		Report_Num	3	Report Number - Values: 000 - Original Report 001-999 - Amended Rpt #1-#999
10 Rx		Rpt_Date	8	Date this report is filed
11 R		LS_Beg_Yr	4	Legislative Session Beginning Year
12 R		LS_End_Yr	4	Legislative Session Ending Year
13 C		Qual_Date	8	Date Qualified (Req if F601/F603 & Amend_Cd=0)
14 C		Eff_Date	8	Effective Date of Auth/Term (Req if F602,F606,F607)
15 R		Bus_Adr1	45	Business Address of Filer
16		Bus_Adr2	45	" " " "
17 R		Bus_City	30	" " " "
18 R		Bus_ST	2	" " " "
19 R		Bus_ZIP4	10	" " " "
20 R		Bus_Phon	20	Phone number
21		Bus_FAX	20	Optional FAX number
22		Bus_Email	60	Optional Email address
23		Mail_Adr1	45	Mailing Address of Filer (if different)
24		Mail_Adr2	45	" " " "
25 C		Mail_City	30	" " " "
26 C		Mail_ST	2	" " " "
27 C		Mail_ZIP4	10	" " " "
28		Mail_Phon	20	Phone number
29 R		Sig_Date	8	Date when signed
30 R		Sig_Loc	45	City and State where signed (not on F604)
31 R		Sig_NamL	200	Signer "as signed" Last name
32 R		Sig_NamF	45	Signer "as signed" First name
33		Sig_NamT	10	Signer "as signed" Prefix or Title
34		Sig_NamS	10	Signer "as signed" Suffix

COVER PAGE RECORD LAYOUT FOR: F601; F602; ...; F607 (Continued)

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R{x}	# C{x}	Field Name	Len	Description
		Prn_NamL	200	Signer "as typed/printed" Last name (not on F604)
		Prn_NamF	45	Signer "as typed/printed" First name (not on F604)
		Prn_NamT	10	Signer "as typed/printed" Prefix or Title
		Prn_NamS	10	Signer "as typed/printed" Suffix
		Sig_Title	40	Title of Signer (not on F604)

----- Variable F601 fields follow when Form_Type=F601 -----

40 R	Stmt_Firm	90	Lobby Firm Name in "Statement of Responsible Officer"
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----- Variable F602/F603 fields follow when Form_Type=[F602|F603] -----

40 C	Ind_CB	1	Individual check-box (One box only must be checked)
41 C	Bus_CB	1	Business check-box
42 C	Trade_CB	1	Industry/Trade/Professional check-box
43 C	Oth_CB	1	Other check-box
44 C	A_B_Name	90	Name A. Individual or B. Business Entity
45	A_B_Adr1	45	Address of A. Individual or B. Business Entity
46	A_B_Adr2	45	" " " " " "
47 C	A_B_City	30	" " " " " "
48 C	A_B_ST	2	" " " " " "
49 C	A_B_ZIP4	10	" " " " " "
50 C	Descrip_1	300	Description of Business Activity, Industry or Other
51 C	Descrip_2	300	Description of specific or other lobbying interests
52 C	C_Less50	1	No. members in Industry Assoc - 50 or less
53 C	C_More50	1	No. members in Industry Assoc - More than 50
54 R	Ind_Class	3	Industry Classification Values: AGR - Agriculture EDU - Education GOV - Government HEA - Health LAB - Labor Unions LEG - Legal PUB - Public Employee POL - Political Organizations UTL - Utilities OTH - Other
55 C	Ind_Descr	100	Description of Industry Classification if [OTH]er

COVER PAGE RECORD LAYOUT FOR: F601; F602; ...; F607 (Continued)

=====

R{x}	# C{x}	Field Name	Len	Description
56 R		Bus_Class	3	Business Classification Values: ENT - Entertainment FIN - Finance/Insurance LOG - Lodging/Restaurants MAN - Manufacturing/Industrial MER - Merchandise/Retail OIL - Oil & Gas PRO - Professional/Trade REA - Real Estate TRN - Transportation OTH - Other
57 C		Bus_Descr	100	Description of Business Classification if [OTH]er
----- Variable F602 fields follow when Form_Type=F602 -----				
58 R		Auth_Name	200	Name authorized of Lobbying Firm
59 R		Auth_Adr1	45	Address of Filer
60		Auth_Adr2	45	" " "
61 R		Auth_City	30	" " "
62 R		Auth_ST	2	" " "
63 R		Auth_ZIP4	10	" " "
----- Variable F603 fields follow when Form_Type=F603 -----				
58 R		Lobby_Int	300	Description of Part III Lobbying Interests
----- Variable F604 fields follow when Form_Type=F604 -----				
40 R		Firm_Name	200	Name of Lobbyist Employer or Lobbying Firm
41		NewCert_CB	1	Will take a New Cert check-box #1 (1 box only)
42		RenCert_CB	1	Will take a Renewal Cert check-box #2 (1 box only)
43		Compleat_Dt	8	Ethics Orient Course Completion Date #3 (1 box only)
44		Lby_Reg_CB	1	Lobby agcy in 601/603 Reg Stmt chk box #1 (1 box only)
45		Lby_604_CB	1	Lobby agcy in this 604 Stmt chk box #2 (1 box only)
46 C		St_Leg_YN	1	Will Lobby State Legislature? Y/N (Req if Lby_604)
47 C		St_Agency	100	List of Identified State Agencies (Req if Lby_604)
----- Variable F607 fields follow when Form_Type=F607 -----				
----- At least one of the following two check-box fields must be used -----				
40 R		Lobby_CB	1	"Lobbyist within the meaning ..." check-box
41 R		L_Firm_CB	1	"Lobbying firm within the meaning ..." check-box

COVER PAGE (PART II; ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT

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R{x}		Max	
#	C{x}	Field Name	Description
-----		Len	-----
01	Rx	Rec_Type	4 Record Type Value: CVR2
02	Rx	Form_Type	4 Form_Type (must equal Form_Type in CVR record) Values: F601; F602; F603

Note: Remainder of CVR record is parsed depending on value of Form_Type.

Refer to Section I description of the CVR2 record for the description of field parsing rules for Lobbyist Statements F601; F602; F603.

AMENDMENT INFORMATION (aka. Form 605; Part I)

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R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	4	Record Type Value: F605
02 Rx		Form_Type	4	Form_Type (must equal Form_Type in CVR record) Values: F601; F603
03 Rx		Exec_Date	8	Date this Amendment executed on
04 Rx		From_Date	8	Report Period From Date of Original Report
05 Rx		Thru_Date	8	Report Period To/Thru Date of Original Report
----- At least one of the Check-boxes below must be "checked"				
06		Add_L_CB	1	Add Lobbyist check-box
07 C		Add_L_Eff	8	Add Lobbyist Effective Date
08 C		A_L_NamL	200	Add Lobbyist Last Name (1st one changed)
09 C		A_L_NamF	45	Add Lobbyist First Name (1st one changed)
10		A_L_NamT	10	Add Lobbyist Prefix/Title (1st one changed)
11		A_L_NamS	10	Add Lobbyist Suffix (1st one changed)
12		Del_L_CB	1	Delete Lobbyist check-box
13 C		Del_L_Eff	8	Delete Lobbyist Effective Date
14 C		D_L_NamL	200	Delete Lobbyist Last Name (1st one changed)
15 C		D_L_NamF	45	Delete Lobbyist First Name (1st one changed)
16		D_L_NamT	10	Delete Lobbyist Prefix/Title (1st one changed)
17		D_L_NamS	10	Delete Lobbyist Suffix (1st one changed)
18		Add_LE_CB	1	Add Lobbyist Employer check-box
19 C		Add_LE_Eff	8	Add Lobbyist Employer Effective Date
20 C		A_LE_NamL	200	Add Lobbyist Employer Last Name (1st one changed)
21 C		A_LE_NamF	45	Add Lobbyist Employer First Name (1st one changed)
22 C		A_LE_NamT	10	Add Lobbyist Employer Prefix/Title (1st one changed)
23 C		A_LE_NamS	10	Add Lobbyist Employer Suffix (1st one changed)
24		Del_LE_CB	1	Delete Lobbyist Employer check-box
25 C		Del_LE_Eff	8	Delete Lobbyist Employer Effective Date
26 C		D_LE_NamL	200	Delete Lobbyist Employer Last Name (1st one changed)
27 C		D_LE_NamF	45	Delete Lobbyist Employer First Name (1st one changed)
28 C		D_LE_NamT	10	Delete Lobbyist Employer Prefix/Title (1st one changed)
29 C		D_LE_NamS	10	Delete Lobbyist Employer Suffix (1st one changed)
30		Add_LF_CB	1	Add Lobbying Firm check-box
31 C		Add_LF_Eff	8	Add Lobbying Firm Effective Date
32 C		A_LF_Name	200	Add Lobbying Firm Name (first one changed)
33		Del_LF_CB	1	Delete Lobbying Firm check-box
34 C		Del_LF_Eff	8	Delete Lobbying Firm Effective Date
35 C		D_LF_Name	200	Delete Lobbying Firm Name (first one changed)
36		Other_CB	1	Other Amendments check-box
37 C		Other_Eff	8	Other Amendments Effective Date
38 C		Other_Desc	100	Description of changes.
39		F606_Yes	1	Lobbyist ceasing all activities (Form 606)
40		F606_No	1	Lobbyist ceasing employment, but remains active

LOBBYIST EMPLOYERS/SUBCONTRACTED CLIENTS: (F601P2A; F601P2B)

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R{x}	# C{x}	Field Name	Max Len	Description
01 Rx		Rec_Type	4	Record Type Value: LEMP
02 Rx		Form_Type	6	Schedule Name/ID Values: F601P2A = F601/Part 2A - Client / Employer F601P2B = F601/Part 2B - Subcontract Client
03 Rx		Tran_ID	24	Transaction ID - permanent value unique to this item
04		RptNo_Made	3	Value 0-999 - report when this item created (optional)
05		RptNo_Void	3	Value 1-999 - report when this item voided (optional)
06 R		Cli_NamL	200	Last Name of [Employing] Client
07 R		Cli_NamF	45	First Name of [Employing] Client
08 R		Cli_NamT	10	Prefix or Title of [Employing] Client
09 R		Cli_NamS	10	Suffix of [Employing] Client
10 R		Cli_Adr1	45	Address of [Employing] Client
11		Cli_Adr2	45	Optional 2nd line of Address
12 R		Cli_City	30	City
13 R		Cli_ST	2	State code
14 R		Cli_ZIP4	10	Zip+4
15 R		Cli_Phon	20	Phone number
16 R		Eff_Date	8	Effective Date of Lobbying Contract
17 R		Con_Period	30	Period of Contract
18 R		AgencyList	200	Agencies to be Lobbied
19 R		Descrip	100	Description of Employer/Client Lobbying Interests

----- Following fields required for Form_Type=F601P2B -----

20 C		Sub_Name	200	Name of Subcontracting Lobbying Firm
21 C		Sub_Adr1	45	Address of Subcontracting Lobbying Firm
22		Sub_Adr2	45	Optional 2nd line of Address
23 C		Sub_City	30	City
24 C		Sub_ST	2	State code
25 C		Sub_ZIP4	10	Zip+4
26 C		Sub_Phon	20	Phone number